

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 10, 2004 8:00 am
Secretary of State

05-10-2004 90465 019 ****61.25

DOCUMENT # N40005 1. Entity Name NEWPORT COVE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 6300 PARK OF COMMERCE BOULEVARD BOCA RATON, FL 33487 US			Mailing Address 591 BROKEN SOUND PKWY. #250 BOCA RATON, FL 33487 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0308459	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
COMMUNITY ASSOCIATION-SIC 951 BROKEN SOUND PKWY. #250 BOCA RATON, FL 33487				Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIMMONS, R. LEE <input checked="" type="checkbox"/> Delete 7782 STIRLING BRIDGE BLVD DELRAY BEACH, FL 33446		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Sheldone, Gloria <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 7946 Stirling Bridge Blvd S DeLray Bch, FL 33446	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SANDLER, DAVID <input checked="" type="checkbox"/> Delete 14061 FAIR ISLE DR DELRAY BEACH, FL 33446		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SANDLER, EILEEN <input type="checkbox"/> Delete 7775 GREAT GLEN CIR. DELRAY BEACH, FL 33446		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VONRAPACKI, MADDY <input type="checkbox"/> Delete 14239 DUNMOON COURT DELRAY BEACH, FL 33446		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Vonrapacki, maddy <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14239 Dunmoon Ct DeLray Bch, FL 33446	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CORDON, DAVID <input checked="" type="checkbox"/> Delete 7716 STIRLING BRIDGE BLVD DELRAY BEACH, FL 33446		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NARDONE, PHYLLIS <input type="checkbox"/> Delete 14090 FAIR ISLE DR. DELRAY BEACH, FL 33446		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Nardone, Phyllis <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 14090 Fair Isle Dr DeLray Bch, FL 33446	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.					
SIGNATURE: <i>Gloria & Sheldone</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			4/30/04 5614983225 <small>Date Daytime Phone #</small>		

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