

# 2000 UNIFORM BUSINESS REPORT (UBR)

**DOCUMENT # N97000006345**

1. Entity Name

**EMMAS COVE PROPERTYOWNER'S ASSOCIATION, INCORPOR**

Principal Place of Business

Mailing Address

C/O JAMES H. LITTLE  
3040 KERSHAW COURT  
MELBOURNE FL 32934

C/O JAMES H. LITTLE  
3040 KERSHAW COURT  
MELBOURNE FL 32934-8247

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

DO NOT WRITE IN THIS SPACE  
5/11/00 90312/025 \$461.00

4. FEI Number

59-3468391

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LITTLE, JAMES H  
3040 KERSHAW COURT  
MELBOURNE FL 32934

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and (title if applicable).

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW:  
FEE IS \$61.25**

8. Election Campaign Financing  
Trust Fund Contribution.

**\$5.00** May Be  
Added to Fees

**Make Check Payable to  
Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
P	LITTLE, JAMES H	3040 KERSHAW COURT	MELBOURNE FL 32934	<input checked="" type="checkbox"/>	<input type="checkbox"/>
T	MICARI, ROSEANNE	3055 KERSHAW COURT	MELBOURNE FL 32934	<input type="checkbox"/>	<input type="checkbox"/>
S	PALERMO, JEANMARIE	3085 KERSHAW COURT	MELBOURNE FL 32934	<input type="checkbox"/>	<input type="checkbox"/>
D	LITTLE, JAMES H	3040 KERSHAW CT	MELBOURNE FL 32934	<input checked="" type="checkbox"/>	<input type="checkbox"/>
D	MICARI, ROSEANNE	3055 KERSHAW CT	MELBOURNE FL 32934	<input type="checkbox"/>	<input type="checkbox"/>
D	PALERMO, JEANMARIE	3085 KERSHAW CT	MELBOURNE FL 32934	<input type="checkbox"/>	<input type="checkbox"/>
P	DAVID GRANT	3010 KERSHAW COURT	MELBOURNE, FL 32934	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	DAVID GRANT	3010 KERSHAW COURT	MELBOURNE, FL 32934	<input type="checkbox"/>	<input checked="" type="checkbox"/>

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (9/99)

5/19