

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000131

FILED
Mar 23, 2012
Secretary of State

Entity Name: OSPREY COVE HOMEOWNER'S ASSOCIATION OF HOBE SOUND, INC.

Current Principal Place of Business:

C/O BRISTOL MANAGEMENT
543 NW LAKE WHITNEY PLACE SUITE 101
PORT SAINT LUCIE, FL 34986 US

New Principal Place of Business:

Current Mailing Address:

C/O BRISTOL MANAGEMENT
543 NW LAKE WHITNEY PLACE SUITE 101
PORT SAINT LUCIE, FL 34986 US

New Mailing Address:

FEI Number: 65-0926994 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

CLEMSON, DAN
BRISTOL MANAGEMENT
543 NW LAKE WHITNEY PLACE SUITE 101
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

MONTAGNA, SCOTT
BRISTOL MANAGEMENT
543 NW LAKE WHITNEY PLACE SUITE 101
PORT SAINT LUCIE, FL 34986 US

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: SCOTT MONTAGNA

03/23/2012

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P
Name: PIERCE, SAMMY A
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: T
Name: QUICKEL, G. GERALD
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: S
Name: COOLIDGE, RICHARD
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101
City-St-Zip: PORT ST. LUCIE, FL 33458

Title: D
Name: BURCHELL, HARRY
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: V
Name: JOHN (JACK), DONOVAN
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101
City-St-Zip: PORT ST. LUCIE, FL 34986

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SAMMY PIERCE

P

03/23/2012

Electronic Signature of Signing Officer or Director

Date