

FILE NOW: FILING FEE IS \$61.25-

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N37397 (9)

1. Corporation Name

COVE POINTE HOMEOWNERS ASSOCIATION INC.

Principal Place of Business

LIGHTHOUSE POINT MGMNT. & REALTY
830 S. TAMiami TRAIL
OSPREY FL 34229

Mailing Address

LIGHTHOUSE POINT MGMNT. & REALTY
830 S. TAMiami TRAIL
OSPREY FL 34229



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3. Date Incorporated or Qualified
03/26/1990

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

21 16 Church Street
Suite, Apt. #, etc.

2a. Mailing Address

26 16 Church Street
Suite, Apt. #, etc.

22 City & State

23 Osprey, Florida
Zip Country

24 34229

25 Sarasota

27 City & State

28 Osprey, Florida
Zip Country

29 34229

30 Sarasota

4. FEI Number

65-0184923

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

LIGHTHOUSE MGMT.
830 S. TAMiami TRAIL
OSPREY FL 34229

10. Name and Address of New Registered Agent

81 Name

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

16 Church Street

83 City

Osprey, Florida

FL

85 Zip Code

34229

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

[Signature] AGENT

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-29-96

12. OFFICERS AND DIRECTORS

TITLE PD ☒ DELETE

NAME BUETER, FRED
STREET ADDRESS 1909 TRADEWINDS CIRCLE
CITY-ST-ZIP VENICE FL 34293

TITLE V ☐ DELETE

NAME KATTERMAN, DERALD
STREET ADDRESS 1932 COVE POINTE DRIVE
CITY-ST-ZIP VENICE FL 34293

TITLE T ☒ DELETE

NAME O'KEEFE, BOB
STREET ADDRESS 1928 COVE POINTE DRIVE
CITY-ST-ZIP VENICE FL 34293

TITLE SD ☐ DELETE

NAME HUGHES, ART
STREET ADDRESS 40 TREMAINE TERR.
CITY-ST-ZIP COBourg, ONTARIO K9A5A-8

TITLE D ☒ DELETE

NAME BARBER, SHERMAN
STREET ADDRESS 1905 TRADEWINDS CIRCLE
CITY-ST-ZIP VENICE FL 34293

TITLE D ☒ DELETE

NAME DANNECKER, DICK
STREET ADDRESS 1952 COVE POINTE DR.
CITY-ST-ZIP VENICE FL 34293

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

VD

KATTERMAN, Derald
1932 Cove Pointe Drive
Venice, FL 34293

PRESIDENT/DIR.

T Williams, Bernice

1933 Tradewinds Circle
Venice, FL 34293

SD Hughes, Arthur

40 Tremaine Terrace
Cobourg, Ontario K9A 5A8

D Cahill, Jim

1922 Cove Pointe Dr.
Venice, FL 34293

AS Keith, J. Lloyd

10 Church St
Osprey, FL 34229

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

[Signature] Asst. Secretary
Signature typed or printed name of signing officer or director

3-29-96

Date

Telephone

941 966 6844

CR2E037 (12/95)