## 2001 UNIFORM BUSINESS REPORT (UBR) FILED Apr 18, 2001 8:00 am <sup>5</sup> Secretary of State **DOCUMENT # 741803** 1. Entity Name THE COVE AT SOUTH BEACHES CONDOMINIUM ASSOCIATIO 04-18-2001 90134 001 \*\*\*\*61.25 04-18-2001 90134 002 \*\*\*\*\*8.75 Mailing Address Principal Place of Business 4230 S HWY A-1-A 4230 S HWY A-1-A P O BOX 510908 P O BOX 510908 36970 MELBOURNE BCH FL 32951-7908 MELBOURNE BCH FL 32951-7908 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Suite, Apt. #, etc. Applied For City & State 4. FEI Number City & State 59-1852801 Not Applicable Country \$8.75 Additional Zip Country 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent uterStreet Address (P.O. Box Number is Not Acceptable) MORSE, JOHN A 22 COVE RD **MELBOURNE BEACH FL 32951-7455** Zip Code 3**29**5 in the state of Florida. 8. The above named entity submits this statement for the purpose of changing its registered office or registered agent Make Check Payable to 9. Election Campaign Financing \$5.00 May Be **FILE NOW:** Trust Fund Contribution. Department of State Added to Fees FEE IS \$61.25 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. Dale T. Ruiter Change Addition TITLE 🛣 Delete NAME BLIAM, RONALD S III NAME 6 cove Road STREET ADDRESS STREET ADDRESS 6 COVE RD CITY-ST-ZIP Melbourne Beach Fl CITY-ST-ZIP MELBOURNE BEACH FL M. Change TITLE **™** Delete TITLE NAME Matthew F. Kritzen WILLIAMS, NANCIE NAME STREET ADDRESS 4-COVE-RD: -- -10-Cove-Road STREET ADDRESS Melbourne Beach, Fl CITY-ST-ZIP CITY-ST-ZIP **MELBOURNE BEACH FL 32951** ☐ Addition ■ Delete TITLE Rowald Bookhold PALMER, MARILYN NAME NAME 1000e Road STREET ADDRESS 29 COVE RD STREET ADDRESS CITY-ST-ZIP Melbourne Beach 71 CITY-ST-ZIP **MELBOURNE BEACH FL 32951** ☐ Addition Change TITLE M Delete TITLE HINCKLE, KENNETH H NAME NAME William E. Yoss STREET ADDRESS 14 Cove Road STREET ADDRESS 34 COVE RD CITY-ST-ZIP 32951 CITY-ST-ZIP **MELBOURNE BEACH FL 32951** ☐ Addition Delete TITLE TITLE MILLER, SHANE NAME NAME STREET ADDRESS STREET ADDRESS 17 COVE RD CITY-ST-ZIP CITY-ST-ZIP **MELBOURNE BEACH FL 32951** ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS

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

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