

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000006268

FILED
Mar 22, 2006
Secretary of State

Entity Name: PHOENICIAN COVE HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

11441 INTERCHANGE CIRCLE SOUTH
MIRAMAR, FL 33025

New Principal Place of Business:

Current Mailing Address:

11441 INTERCHANGE CIRCLE SOUTH
MIRAMAR, FL 33025

New Mailing Address:

FEI Number: 20-0133151

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPELL, KAREN R
2830 S ALAFAYA TRAIL
STE 150
ORLANDO, FL 32828 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LUNETTA, CARL
Address: 11441 INTERCHANGE CIRCLE SOUTH
City-St-Zip: MIRAMAR, FL 33025

Title: VD () Delete
Name: LUNETTA, ARLENE
Address: 11441 INTERCHANGE CIRCLE SOUTH
City-St-Zip: MIRAMAR, FL 33025

Title: STD () Delete
Name: LUNETTA, CARMEN
Address: 11441 INTERCHANGE CIRCLE SOUTH
City-St-Zip: MIRAMAR, FL 33025

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: CARL LUNETTA

PD

03/22/2006

Electronic Signature of Signing Officer or Director

Date