2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N98000004063

1. Entity Name EASTLAND COVE HOMEOWNER'S ASSOCIATION, INC.



FILED

Mar 29, 2006 8:00 am Secretary of State

03-29-2006 90116 012 ****61.25

1973 NW 45 ST 19			Mailing Address 1973 NW 45 ST OAKLAND PARK, FL 33309				1 (89)(10) 2(8)	1911) 1711 9		8 611 / 9 8 211 - 81 8 1	1 8 8 6 7 7 8 8 11	II(6) 61 (62)
2. Principal P	lace of Business	3. Mailing Address										
Suite, Apt.	#, etc.	Suite, Apt. #, etc.					02132006	Chg-N	P	CR2E037	7 (11/05)	
City & Stat	е	City & State					4. FEI Number 41-2070				<u> </u>	oplied For
Zip	Country	Zip		untry		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							
DEAN JAMES D					Name							
DEAN, JAMES D 1973 NW 45 ST			Street Addres			ddress (F	ss (P.O. Box Number is Not Acceptable)					
OAKLAND PARK, FL 33309					·	•						
					City					FL	Zip Cod	е
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. I am familiar with, and accept												
the obligat	ions of registered agent.											
CICNATURE											•	
SIGNATURE .	when reinstating)			DATE								
Filing Fee is \$61.25 Due by May 1, 2006 9. Election Car Trust Fund 0					_ 					Make check payable to Florida Department of State		
10.				11.			ADDITIONS/CHA	NGES TO	O OFFICER	S AND DIR	ECTORS IN	
TITLE	PD FRANK	Delete	E		☐ Change							
NAME Street address	RE, FRANK 4471 NW 20TH AVE		eet address									
CITY-ST-ZIP OAKLAND PARK, FL 33309			CITY									
TITLE	VD		Delete	TITL	.E						☐ Change	Addition
NAME	DAVIDSON, TIM		<i>γ</i>	NAM	AE .						_	
STREET ADDRESS	2000 NW 44TH STREET				EET ADDRESS							
CITY-ST-ZIP	OAKLAND PARK, FL 33309				r-ST-ZIP							
TITLE NAME	VD BROSSEAU, ROBERT		Delete	TITL		į					☐ Change	Addition
STREET ADDRESS	4491 NW 20TH AVE				eet address							
CITY-ST-ZIP	OAKLAND PARK, FL 33309				r-ST-ZIP							
TITLE	D		☐ Delete	TITL	.E	VÌ	<u> </u>				Change	Addition
NAME	PICKELS, JOHN			NAM	-	P:c	D Kels, Jol					
STREET ADDRESS CITY-ST-ZIP	1921 NW 44TH ST OAKLAND PARK, FL 33309				EET ADDRESS (-St-ZIP		•					
TITLE	TD		☐ Delete	TITL		O.V.	2 - 77		-		Change	☐ Addition
NAME	DEAN, JAMES		L. Delete	NAM		ر ۷ کے	p + TD an, Jan	1 6		•	Onlings	C) Addition
STREET ADDRESS	1973 NW 45TH ST				EET ADDRESS	ا هجو	~, ser	C.27				
Crty-St-ZiP	OAKLAND PARK, FL 33309			CITY	Y-ST-ZIP							
TITLE	MAD VD		☐ Delete	TITL		}					☐ Change	Addition
NAME CTREET ADDRESS	Carl Day Street	origie	-	NAM					•			
STREET ADDRESS CITY-ST-ZIP	Dakland Park,	[: .?	2209		EET ADDRESS Y+ST-ZIP							
1	I U WILL TOUTH, "	- ~ ·	\sim $^{\prime}$			1						

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

913 20 mb SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

954-410-6012 Daytime Phone #