

2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000000389

FILED
Mar 29, 2010
Secretary of State

Entity Name: SOUTH COVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

CMC MANAGEMENT, INC.
2950 JOG ROAD
GREENACRES, FL 33467 US

New Principal Place of Business:

Current Mailing Address:

CMC MANAGEMENT, INC.
2950 JOG ROAD
GREENACRES, FL 33467 US

New Mailing Address:

FEI Number: 65-0436242

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ASSOCIATED CORPORATE SERVICES, LLC
6111 BROKEN SOUND PARKWAY NW
SUITE 200
BOCA RATON, FL 33487 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: D
Name: BERTAZON, BENJAMIN
Address: 105 COVE ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: TD
Name: MAST, NORMAN
Address: 165 COVE ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: PD
Name: SISSON, NOEL
Address: 200 COVE ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: SD
Name: ERSTEIN, HARRIS
Address: 125 COVE ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

Title: VPO
Name: BENNETT, JOAN
Address: 189 COVE ROAD
City-St-Zip: WEST PALM BEACH, FL 33413 US

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: NOEL SISSON

PD

03/29/2010

Electronic Signature of Signing Officer or Director

Date