

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 720611

FILED
Mar 31, 2011
Secretary of State

Entity Name: OLD PORT COVE PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1201 U.S. HIGHWAY 1
SUITE 330
NORTH PALM BEACH, FL 33408

New Principal Place of Business:

Current Mailing Address:

1201 U.S. HIGHWAY 1
SUITE 330
NORTH PALM BEACH, FL 33408

New Mailing Address:

FEI Number: 59-1536203 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

SKRLD, INC.
201 ALHAMBRA CIR STE 1102
CORAL GABLES, FL 33134 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: FORD, JIM
Address: 1133 MARINE WAY EAST 11R
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: VP/T
Name: DANIELLO, LOUIS
Address: 100 LAKESHORE DR 1753
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: P
Name: ANASTASI, THOMAS
Address: 115 LAKESHORE DR
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D
Name: NORTON, BILL
Address: 108 LAKESHORE DRIVE 1740
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: D
Name: WITKIN, LAURENCE
Address: 136 LAKESHORE DR 512
City-St-Zip: NORTH PALM BEACH, FL 33408

Title: S
Name: DAVID, GREGG
Address: 100 LAKESHORE DRIVE 1553
City-St-Zip: NORTH PALM BEACH, FL 33408

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: THOMAS ANASTASI

P

03/31/2011

Electronic Signature of Signing Officer or Director

Date