

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000008463

FILED  
Feb 02, 2012  
Secretary of State

**Entity Name:** COVE ISLE COMMUNITY ASSOCIATION, INC.

**Current Principal Place of Business:**

543 NW LAKE WHITNEY PLACE  
SUITE 101  
PORT ST. LUCIE, FL 34986

**New Principal Place of Business:**

**Current Mailing Address:**

543 NW LAKE WHITNEY PLACE  
SUITE 101  
PORT ST. LUCIE, FL 34986

**New Mailing Address:**

**FEI Number:** 20-2489564

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

INGLIS, STEVE  
C/O BRISTOL MGMT SERVICES, INC.  
1930 COMMERCE LANE, STE 1  
JUPITER, FL 33458 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: P  
Name: GRUNER, LEON  
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: VP  
Name: BROWN, ROGER  
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: S  
Name: LEWIS, ATANYA  
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: T  
Name: BOWER, RONALD  
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101  
City-St-Zip: PORT ST. LUCIE, FL 34986

Title: D  
Name: PRYPUTNIEWICZ, ROMAN  
Address: 543 NW LAKE WHITNEY PLACE, SUITE 101  
City-St-Zip: PORT ST. LUCIE, FL 34986

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: LIZ DIAZ, AS AGENT

LCAM

02/02/2012

Electronic Signature of Signing Officer or Director

Date