2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 12, 2012
Secretary of State

DOCUMENT# N00000000923

Entity Name: COVE TOWERS PRESERVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O AMERICAN PROPERTY MANAGEMENT SVC
8825 TAMIAMI TRAIL EAST
NAPLES, FL 34113

New Principal Place of Business:

Current Mailing Address:

C/O AMERICAN PROPERTY MANAGEMENT SVC
8825 TAMIAMI TRAIL EAST
NAPLES, FL 34113

New Mailing Address:

FEI Number: 65-1025296 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

AMERICAN PROPERTY MANAGEMENT SVC
8825 TAMIAMI TRAIL EAST
NAPLES, FL 34113 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: ACKLAND, VERNON
Address: 455 COVE TOWER DR SUITE 1701
City-St-Zip: NAPLES, FL 34110

Title: VP
Name: KARAM, ROGER DR
Address: 445 COVE TOWER DR 703
City-St-Zip: NAPLES, FL 34110

Title: T
Name: PERINI, CHRISTOPHER
Address: 445 COVE TOWER DR 402
City-St-Zip: NAPLES, FL 34110

Title: S
Name: KOPP, JANE
Address: 455 COVE TOWER DR SUITE 301
City-St-Zip: NAPLES, FL 34110

Title: D
Name: WHEELER, MARY
Address: 455 COVE TOWER DR SUITE 1702
City-St-Zip: NAPLES, FL 34110

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: VERNON ACKLAND P 04/12/2012

Electronic Signature of Signing Officer or Director — Date