## **2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

**DOCUMENT# 736699** 

Entity Name: PROPERTY OWNERS OF GULF COVE, INC.

inity Name. PROPERTY OWNERS OF GOLF COVE, I

**Current Principal Place of Business:** 

NORLANDER AND DAVID AVES PORT CHARLOTTE. FL 33981

**Current Mailing Address:** 

P O BOX 27112

EL JOBEAN. FL 33927 US

FEI Number: 59-1709441 Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

MENNENGA, JEAN 5537 GILLOT BLVD

PORT CHARLOTTE, FL 33981 US

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: JEAN MENNENGA 02/12/2013

Electronic Signature of Registered Agent

Date

FILED Feb 12, 2013

**Secretary of State** 

CC0469923965

Officer/Director Detail:

Title PRES Title SEC

NameWOZNIAK, RONALDNameLANDREVILLE, JEANAddress5361 FARLEY STREETAddress5920 GILLOT BLVD

City-State-Zip: PORT CHARLOTTE FL 33981 City-State-Zip: PORT CHARLOTTE FL 33981

Title VP Title DIR

NameCORMIER, DAVIDNamePELESKE, RICHARDAddress12420 HATHAWAY TERRACEAddress6603 DAVID BOULEVARDCity-State-Zip:PORT CHARLOTTE FL 33981City-State-Zip:PORT CHARLOTTE FL 33981

Title DIRECTOR Title TREASURER

Name DONOHUE, MICHAEL Name MENNENGA, JEAN
Address 2483 QUAIL TERRACE Address 5537 GILLOT BLVD

City-State-Zip: PORT CHARLOTTE FL 33981 City-State-Zip: PORT CHARLOTTE FL 33981

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: JEAN MENNENGA TREASURER

Electronic Signature of Signing Officer/Director Detail

02/12/2013 Date