

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 740067

**FILED**  
**Mar 11, 2017**  
**Secretary of State**  
**CC0071228679**

**Entity Name:** SECRET COVE CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

1 SECRET COVE PL  
JACKSONVILLE, FL 32216

**Current Mailing Address:**

P.O. BOX 550706  
JACKSONVILLE, FL 32255-7706

**FEI Number: 59-2378008**

**Certificate of Status Desired: No**

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

HILL, MARK  
8222 CUTTER PLACE  
JACKSONVILLE, FL 32216 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:** MARK HILL

03/11/2017

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title P  
Name LEWIS, DALE  
Address 3229 HIDDEN LAKE DR. W  
City-State-Zip: JACKSONVILLE FL 32216

Title SECRETARY  
Name CONDY, LILY  
Address 8228 OLD PORT CIR. N  
City-State-Zip: JACKSONVILLE FL 32216

Title VP  
Name AMICO, JONH  
Address 3535 BATEAU RD. W  
City-State-Zip: JACKSONVILLE FL 32216

Title T  
Name HILL, MARK  
Address 8222 CUTTER PLACE  
City-State-Zip: JACKSONVILLE FL 32216

*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:** MARK HILL

**TREASURER**

03/11/2017

Electronic Signature of Signing Officer/Director Detail

Date