

2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 746876

Entity Name: COVE SPRINGS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**40347 US HWY 19 N
SUITE 129
TARPON SPRINGS, FL 34689**Current Mailing Address:**40347 US HWY 19 N
SUITE 129
TARPON SPRINGS, FL 34689 US**FEI Number:** 59-2685890**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**PROACTIVE PROPERTY MANAGEMENT
40347 US HWY 19 N
SUITE 129
TARPON SPRINGS, FL 34689 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:** PATRICK KOCHENOUR

04/26/2017

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title TREASURER
Name CARRIGAN, CHELETTE
Address 40347 US HWY 19 N
 SUITE 129
City-State-Zip: TARPON SPRINGS FL 34689

Title PRESIDENT
Name ROSS, STEVEN
Address 40347 US HWY 19 N
 SUITE 129
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name MERILLI, ROBERT
Address 40347 US HWY 19 N
 SUITE 129
City-State-Zip: TARPON SPRINGS FL 34689

Title VP
Name GREENE, DAVID
Address 40347 US HWY 19 N
 SUITE 129
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name LAW, MARY ANN
Address 40347 US HWY 19 N
 SUITE 129
City-State-Zip: TARPON SPRINGS FL 34689

Title SECRETARY
Name WILLIAMS, ALAUNDA
Address 40347 US HWY 19 N
 SUITE 129
City-State-Zip: TARPON SPRINGS FL 34689

Title DIRECTOR
Name MORLEY, CONSTANCE
Address 40347 US HWY 19 N
 SUITE 129
City-State-Zip: TARPON SPRINGS FL 34689

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: STEVEN ROSS

MANAGER

04/26/2017

Electronic Signature of Signing Officer/Director Detail

Date