2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748254

Entity Name: CATALINA COVE HOMEOWNERS' ASSOCIATION INC.

FILED
Jan 14, 2016
Secretary of State
CC9871024221

Current Principal Place of Business:

FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N SUITE 100 SAINT PETERSBURG, FL 33716

Current Mailing Address:

FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR N SUITE 100 SAINT PETERSBURG, FL 33716 US

FEI Number: 59-2130826 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TREADWAY FENTON, PLLC 1111AVENIDA DEL CIRCO B

VENICE, FL 34285 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: TREADWAY FENTON PLLC

01/14/2016

Electronic Signature of Registered Agent

Date

Officer/Director Detail:

Title P Title VP

Name KESSELL, BONNIE Name DEPASCALE, JULIA M

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N SUITE 100 2870 SCHERER DR N SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716 City-State-Zip: SAINT PETERSBURG FL 33716

Title S Title T

Name OEPPINGER, CHRISTOPHER Name WISER, NANETTE

Address FIRSTSERVICE RESIDENTIAL Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N SUITE 100 2870 SCHERER DR N SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716 City-State-Zip: SAINT PETERSBURG FL 33716

Title DIRECTOR
Name TODD, DONALD

Address FIRSTSERVICE RESIDENTIAL

2870 SCHERER DR N SUITE 100

City-State-Zip: SAINT PETERSBURG FL 33716

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: BONNIE KESSELL PRESIDENT 01/14/2016