

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 753385

**Entity Name:** THE COVE AT LAKE MIRA HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**3947 LAKE MIRA DR  
ORLANDO, FL 32817**Current Mailing Address:**P O BOX 1804  
GOLDENROD, FL 32733**FEI Number: 26-2670784****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**MCKNIGHT, DAVID C  
3947 LAKE MIRA DR.  
ORLANDO, FL 32817 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: DAVID MCKNIGHT****07/27/2021**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title	VP	Title	PRES
Name	TARR, RON	Name	CHAMBERS, BUDDY
Address	4064 LAKE MIRA DR.	Address	4101 LAKE MIRA DR
City-State-Zip:	ORLANDO FL 32817	City-State-Zip:	ORLANDO FL 32817
Title	D	Title	DIRECTOR
Name	SMITH, KEVIN	Name	REYES, KRISTEN
Address	8536 SIDON ST.	Address	3936 LAKE MIRA DR.
City-State-Zip:	ORLANDO FL 32817	City-State-Zip:	ORLANDO FL 32817
Title	DIRECTOR	Title	TREASURER
Name	FORKENBROCK, RALPH	Name	MCKNIGHT, DAVID C
Address	4125 LAKE MIRA DR.	Address	3947 LAKE MIRA DR.
City-State-Zip:	ORLANDO FL 32817	City-State-Zip:	ORLANDO FL 32817

*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: DAVID C MCKNIGHT****TREASURER****07/27/2021**

Electronic Signature of Signing Officer/Director Detail

Date