

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 754309

**FILED**  
**Jan 31, 2016**  
**Secretary of State**  
**CC8371243063**

**Entity Name:** CROWN COVE OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

615 CROWN COVE  
PENSACOLA, FL 32502

**Current Mailing Address:**

P.O. BOX 1141  
PENSACOLA, FL 32591 US

**FEI Number:** 59-2745987

**Certificate of Status Desired:** No

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

SPATCH, CHARLES E.  
615 CROWN COVE  
PENSACOLA, FL 32502 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:** CHARLES E. SPATCH

01/31/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SPATCH, CHARLES E.  
Address        615 CROWN COVE  
City-State-Zip: PENSACOLA FL 32502

Title            V, AND TREASURER  
Name            SPATCH, CHARLES  
Address        613 CROWN COVE DR  
City-State-Zip: PENSACOLA FL 32501

Title            D  
Name            PEDE, LARRY  
Address        605 CROWN COVE DR  
City-State-Zip: PENSACOLA FL 32502

Title            D  
Name            JACKSON, BARBARA  
Address        601 CROWN COVE DR  
City-State-Zip: PENSACOLA FL 32502

Title            D  
Name            STEPHENS, KEVIN  
Address        1300 E. OLIVE RD.  
City-State-Zip: PENSACOLA FL 32514

*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:** CHARLES SPATCH

**PRESIDENT**

01/31/2016

Electronic Signature of Signing Officer/Director Detail

Date