

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

DOCUMENT# N03000009585

**FILED**  
**Apr 17, 2016**  
**Secretary of State**  
**CC0600410659**

**Entity Name:** COVEWOOD NEIGHBORHOOD ASSOCIATION, INC.

**Current Principal Place of Business:**

40347 US 19 N  
STE 229  
TARPON SPRINGS, FL 34689

**Current Mailing Address:**

40347 US 19 N  
STE 229  
TARPON SPRINGS, FL 34689 US

**FEI Number:** 02-0715064

**Certificate of Status Desired:** No

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

RANALLO, JAMES J  
CITADEL PROPERTY MANAGEMENT GRP, INC.  
40347 US 19 N STE 229  
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:** JAMES J RANALLO

04/17/2016

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT, SECRETARY, DIRECTOR  
Name            BAKER, RAYMOND  
Address        40347 US 19 N  
                  STE 229  
City-State-Zip: TARPON SPRINGS FL 34689

Title            VP  
Name            RATLIFF, CHARLES  
Address        40347 US 19 N  
                  STE 229  
City-State-Zip: TARPON SPRINGS FL 34689

Title            SECRETARY, TREASURER  
Name            WILLIAMS, JENNIFER  
Address        40347 US 19 N  
                  STE 229  
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:** RAYMOND BAKER

**PRESIDENT**

04/17/2016

Electronic Signature of Signing Officer/Director Detail

Date