

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007248

Entity Name: COLEE COVE LANDING HOMEOWNERS ASSOCIATION, INC.

FILED
Feb 20, 2015
Secretary of State
CC3888104770

Current Principal Place of Business:

11555 CENTRAL PKWY - STE. 801
JACKSONVILLE, FL 32224

Current Mailing Address:

11555 CENTRAL PKWY - STE. 801
JACKSONVILLE, FL 32224 US

FEI Number: 20-1446031

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

FIRST COAST ASSOCIATION MANAGEMENT LLC
11555 CENTRAL PKWY - STE. 801
JACKSONVILLE, FL 32224 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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title DIRECTOR
Name GANS, BARRY
Address 11555 CENTRAL PARKWAY
 SUITE 801
City-State-Zip: JACKSONVILLE FL 32224

Title PRESIDENT
Name TUCKER, KATHLENE
Address 11555 CENTRAL PARKWAY
 SUITE 801
City-State-Zip: JACKSONVILLE FL 32224

Title SECRETARY / TREASURER
Name VASQUEZ, MATT
Address 11555 CENTRAL PARKWAY
 SUITE 801
City-State-Zip: JACKSONVILLE FL 32224

Title VP
Name BLOUNT, MICHAEL
Address 11555 CENTRAL PARKWAY
 SUITE 801
City-State-Zip: JACKSONVILLE FL 32224

Title DIRECTOR
Name BOYD, JACK
Address 11555 CENTRAL PARKWAY
 SUITE 801
City-State-Zip: JACKSONVILLE FL 32224

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: KATHLENE TUCKER

PRESIDENT

02/20/2015

Electronic Signature of Signing Officer/Director Detail

Date