

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

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FILED
Jan 14, 2014
Secretary of State
CC8449691645

Entity Name: COVE POINTE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

338 BUNKERS COVE ROAD
PANAMA CITY, FL 32401

Current Mailing Address:

338 BUNKERS COVE ROAD
PANAMA CITY, FL 32401 US

FEI Number: 20-4305962

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

REISS, CHRISTINE L
338 BUNKERS COVE ROAD
PANAMA CITY, FL 32401 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 D
Name NEWTON, TAMMY M
Address 312 COVE GARDENS CIRCLE
City-State-Zip: PANAMA CITY FL 32401

Title D,T
Name REISS, CHRISTINE L
Address 338 BUNKERS COVE ROAD
City-State-Zip: PANAMA CITY FL 32401

Title D
Name SPENCER, ROGER
Address 206 BUNKERS COVE RD
City-State-Zip: PANAMA CITY FL 32404

Title D, S
Name NEUBAUER, THOMAS S
Address 608 SHORELINE DRIVE
City-State-Zip: PANAMA CITY FL 32404

Title D, P
Name DYE, JOHN E
Address 1139 COVE POINTE DR.
City-State-Zip: PANAMA CITY FL 32401

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: CHRISTINE L REISS

DIRECTOR/TREASURER

01/14/2014

Electronic Signature of Signing Officer/Director Detail

Date