

**2017 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09000000021

**FILED**  
**Mar 30, 2017**  
**Secretary of State**  
**CC0315868251**

**Entity Name:** HOLIDAY COVE RV RESORT CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

11900 CORTEZ ROAD WEST  
PO BOX # 713  
CORTEZ, FL 34215

**Current Mailing Address:**

11900 CORTEZ ROAD WEST  
PO BOX # 713  
CORTEZ, FL 34215 US

**FEI Number: 26-3980314**

**Certificate of Status Desired: No**

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

SAMPSON, LORI  
12671 WHITEHALL DRIVE  
FORT MYERS, FL 33907 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: LORI SAMPSON**

**03/30/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            COSTANTINO, ALFRED  
Address        11900 CORTEZ ROAD WEST  
                  PO BOX # 713  
City-State-Zip: CORTEZ FL 34215

Title            VP  
Name            SCHWARTZ, DAVID  
Address        11900 CORTEZ ROAD WEST  
                  PO BOX 724  
City-State-Zip: CORTEZ FL 34215

Title            SECRETARY  
Name            SINSKI, MICHAEL  
Address        11900 CORTEZ ROAD WEST  
                  PO BOX # 713  
City-State-Zip: CORTEZ FL 34215

Title            TREASURER  
Name            SCHOUTEN, HANS  
Address        11900 CORTEZ ROAD WEST  
                  PO BOX # 713  
City-State-Zip: CORTEZ FL 34215

Title            DIRECTOR  
Name            BUSS, MARY  
Address        11900 CORTEZ ROAD WEST  
                  PO BOX # 713  
City-State-Zip: CORTEZ FL 34215

*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: HANS SCHOUTEN**

**TREASURER**

**03/30/2017**

Electronic Signature of Signing Officer/Director Detail

Date