

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N09039

**Entity Name:** EGRET'S COVE HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

7145 TURNER RD., SUITE 101  
ROCKELGE, FL 32952

**Current Mailing Address:**

7145 TURNER RD., SUITE 101  
ROCKELGE, FL 32952 US

**FEI Number: 32-0304930**

**Certificate of Status Desired: No**

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

OMEGA COMMUNITY MANAGEMENT  
7145 TURNER RD., SUITE 101  
ROCKELGE, FL 32952 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            PRESIDENT  
Name            CATAN, CHRIS  
Address        7145 TURNER RD., SUITE 101  
City-State-Zip: ROCKELGE FL 32952

Title            VP  
Name            SZYDLOWSKI, GEORGE  
Address        7145 TURNER RD., SUITE 101  
City-State-Zip: ROCKELGE FL 32952

Title            SECRETARY, TREASURER  
Name            JOHNSON, LAURA  
Address        7145 TURNER RD., SUITE 101  
City-State-Zip: ROCKELGE FL 32952

*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: CATAN, CHRIS**

**PRESIDENT**

**04/29/2024**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date