

2014 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

DOCUMENT# N13000004298

Entity Name: THE COVE AT LOGGERHEAD MARINA ASSOCIATION, INC.

FILED
Aug 20, 2014
Secretary of State
CC1704888373

Current Principal Place of Business:

551 NORTH CATTLEMEN ROAD
SUITE 200
SARASOTA, FL 34232

Current Mailing Address:

551 NORTH CATTLEMEN ROAD
SUITE 200
SARASOTA, FL 34232 US

FEI Number: 46-2699237

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NRAI SERVICES, INC.
1200 SOUTH PINE ISLAND ROAD
PLANTATION, FL 33324 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 VP, SECRETARY, DIRECTOR
Name BRIONES, TRACY
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232

Title VP, TREASURER, DIRECTOR
Name MANSFIELD, MICHAEL E.
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232

Title VP
Name KEMPTON, JOHN STEVEN
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232

Title DIRECTOR, PRESIDENT
Name PRICE, ROBERT
Address 551 NORTH CATTLEMEN ROAD
SUITE 200
City-State-Zip: SARASOTA FL 34232

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: TRACY BRIONES

**VP, SECRETARY,
DIRECTOR**

08/20/2014

Electronic Signature of Signing Officer/Director Detail

Date

