

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24057

**Entity Name:** SPYGLASS AT ADMIRAL'S COVE CONDOMINIUM ASSOCIATION, INC.

**FILED**  
**Apr 18, 2013**  
**Secretary of State**  
**CC9304729587**

**Current Principal Place of Business:**

ONE ADMIRAL'S COVE BLVD  
JUPITER, FL 33477

**Current Mailing Address:**

ONE ADMIRAL'S COVE BLVD  
JUPITER, FL 33477 US

**FEI Number: 65-0062205**

**Certificate of Status Desired: Yes**

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

CORNETT, JANE ESQ.  
401 EAST OSCEOLA, SUITE 102  
STUART, FL 34994 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 PD  
Name COHEN, BILL  
Address ONE ADMIRAL'S COVE BLVD.  
City-State-Zip: JUPITER FL 33477

Title VPD  
Name DAVIS, PEGGY  
Address ONE ADMIRAL'S COVE BLVD.  
City-State-Zip: JUPITER FL 33477

Title SD  
Name ROCKOFF, STEVE  
Address ONE ADMIRAL'S COVE BLVD.  
City-State-Zip: JUPITER FL 33477

Title TD  
Name MEYERSON, ALLAN  
Address ONE ADMIRAL'S COVE BLVD.  
City-State-Zip: JUPITER FL 33477

Title D  
Name SCHARR, JEROME M  
Address ONE ADMIRAL'S COVE BLVD.  
City-State-Zip: JUPITER FL 33477

*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: PEGGY DAVIS**

**VICE PRESIDENT**

**04/18/2013**

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

\_\_\_\_\_  
Date