

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

DOCUMENT# N31809

**Entity Name:** LIGHTHOUSE COVE CONDOMINIUM, INC.

**Current Principal Place of Business:**

1978 US 1  
SUITE 106  
ROCKLEDGE, FL 32955

**Current Mailing Address:**

1978 US 1  
SUITE 106  
ROCKLEDGE, FL 32955 US

**FEI Number: 59-2986759**

**Certificate of Status Desired: No**

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

ADVANCED PROPERTY MANAGEMENT, INC  
1978 US 1  
SUITE 106  
ROCKLEDGE, FL 32955 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: VAN MOORE**

**02/27/2017**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            LACORTE, JANET  
Address        1978 US 1  
                  SUITE 106  
City-State-Zip: ROCKLEDGE FL 32955

Title            DIRECTOR  
Name            BARBATO, GERALD  
Address        1978 US 1  
                  SUITE 106  
City-State-Zip: ROCKLEDGE FL 32955

Title            SECRETARY  
Name            CIOPPA, MONIQUE DELLA  
Address        1978 US 1  
                  SUITE 106  
City-State-Zip: ROCKLEDGE FL 32955

Title            TREASURER  
Name            DEMORE, LOU  
Address        1978 US 1  
                  SUITE 106  
City-State-Zip: ROCKLEDGE FL 32955

Title            VP  
Name            HESFORD, JEAN  
Address        1978 US 1  
                  SUITE 106  
City-State-Zip: ROCKLEDGE FL 32955

*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: JANET LACORTE**

**PRESIDENT**

**02/27/2017**

Electronic Signature of Signing Officer/Director Detail

Date