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: CURT CHANDLER

Electronic Signature of Signing Officer/Director Detail

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

Entity Name: EAGLE COVE COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

FIRST CHOICE ASSOC. MGMT 4174 WOODLANDS PARKWAY PALM HARBOR, FL 34685

Current Mailing Address:

FIRST CHOICE ASSOC. MGMT 4174 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US

FEI Number: 59-2949570

Name and Address of Current Registered Agent:

FIRST CHOICE ASSOC. MGMT. 4174 WOODLANDS PKWY. PALM HARBOR, FL 34685 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

Officer/Director Detail :

Title	Р	Title	TREASURER
Name	CHANDLER, CURT	Name	ROBINSON, PAUL
Address	4174 WOODLANDS PARKWAY	Address	4174 WOODLANDS PARKWAY
City-State-Zip:	PALM HARBOR FL 34685	City-State-Zip:	PALM HARBOR FL 34685
Title	SEC	Title	VP
Title Name	SEC BARRETT, KENNETH	Title Name	VP KAYARIAN, LISA

PRESIDENT

02/26/2015

FILED Feb 26, 2015 Secretary of State CC8155906812

Certificate of Status Desired: No

Date

Date