

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35287

**FILED**  
**Mar 03, 2023**  
**Secretary of State**  
**3718771817CC**

**Entity Name:** PALM COVE PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O REALTIME PROPERTY MANAGEMENT  
612 N. ORANGE AVENUE SUITE C4  
JUPITER, FL 33458

**Current Mailing Address:**

C/O REALTIME PROPERTY MANAGEMENT  
612 N. ORANGE AVENUE SUITE C4  
JUPITER, FL 33458 US

**FEI Number:** 65-0161146

**Certificate of Status Desired:** No

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

GROGAN, BRENNAN ESQ.  
824 WEST INDIANTOWN ROAD  
JUPITER, FL 33458 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:** BRENNAN GROGAN

03/03/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            KULWICKI, JULIE  
Address        C/O REALTIME PROPERTY  
                  MANAGEMENT  
                  612 N. ORANGE AVENUE SUITE C4  
City-State-Zip: JUPITER FL 33458

Title            VP  
Name            SCHOENDIENST, ANDY  
Address        C/O REALTIME PROPERTY  
                  MANAGEMENT  
                  612 N. ORANGE AVENUE SUITE C4  
City-State-Zip: JUPITER FL 33458

Title            TREASURER  
Name            LILLY, JOSEPH  
Address        C/O REALTIME PROPERTY  
                  MANAGEMENT  
                  612 N. ORANGE AVENUE SUITE C4  
City-State-Zip: JUPITER FL 33458

Title            SECRETARY  
Name            COOK, DONNA  
Address        C/O REALTIME PROPERTY  
                  MANAGEMENT  
                  612 N. ORANGE AVENUE SUITE C4  
City-State-Zip: JUPITER FL 33458

Title            DIRECTOR  
Name            CIZEWSKI, DEBRA  
Address        C/O REALTIME PROPERTY  
                  MANAGEMENT  
                  612 N. ORANGE AVENUE SUITE C4  
City-State-Zip: JUPITER FL 33458

*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:** JULIE KULWICKI

**PRESIDENT**

03/03/2023

Electronic Signature of Signing Officer/Director Detail

Date