PRESIDENT Electronic Signature of Signing Officer/Director Detail

DOCUMENT# N40005 Entity Name: NEWPORT COVE HOMEOWNERS ASSOCIATION, INC.

2023 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL

Current Principal Place of Business:

GULFSTREAM SERVICE MANAGEMENT 1500 GATEWAY BLVD SUITE 220 BOYNTON BEACH, FL 33426

Current Mailing Address:

REPORT

GULFSTREAM SERVICE MANAGEMENT 1500 GATEWAY BLVD SUITE 220 BOYNTON BEACH, FL 33426 US

FEI Number: 65-0308459

Name and Address of Current Registered Agent:

TUCKER & LOKEINSKY, P.A. 800 EAST BROWARD BOULEVARD SUITE 710 FORT LAUDERDALE, FL 33301 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	E: JESSICA LOKEINSKY, ESQ.			02/15/2023
	Electronic Signature of Registered Agent			Date
Officer/Dire	ctor Detail :			
Title	PRESIDENT	Title	VP	
Name	DEEMER , JOHN	Name	MILLER, RACQUEL	
Address	1500 GATEWAY BLVD SUITE 220	Address	1500 GATEWAY BLVD SUITE 220	
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426	
Title	TREASURER	Title	SECRETARY	
Name	AZOR, PETE	Name	ACHING, TARA	
Address	1500 GATEWAY BLVD SUITE 220	Address	1500 GATEWAY BLVD SUITE 220	
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426	
Title	DIRECTOR	Title	D	
Name	DIMARCANTONIO, CHRIS	Name	ANAND, SANJIV	
Address	1500 GATEWAY BLVD SUITE 220	Address	1500 GATEWAY BLVD SUITE 220	
City-State-Zip:	BOYNTON BEACH FL 33426	City-State-Zip:	BOYNTON BEACH FL 33426	
Title	DIRECTOR			
Name	SALVINO, MICHAEL			
Address	1500 GATEWAY BLVD SUITE 220			
City-State-Zip:	BOYNTON BEACH FL 33426			

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: JOHN DEEMER

FILED Feb 15, 2023 Secretary of State 1593330029CC

Certificate of Status Desired: No

02/15/2023 Date