

**2024 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N93000003604

**FILED**  
**Apr 10, 2024**  
**Secretary of State**  
**0118106954CC**

**Entity Name:** EGRET COVE AT MAPLEWOOD HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O COASTAL PROPERTY MANAGEMENT  
1061 E. INDIANTOWN ROAD SUITE 310  
JUPITER, FL 33477

**Current Mailing Address:**

C/O COASTAL PROPERTY MANAGEMENT  
1061 E. INDIANTOWN ROAD SUITE 310  
JUPITER, FL 33477 US

**FEI Number: 59-3234615**

**Certificate of Status Desired: No**

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

COPPLE, RYAN ATTY  
601 HERITAGE DR. STE 222A  
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: RYAN COPPLE**

**04/10/2024**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title           TREASURER  
Name           ROTH, FLORENCE  
Address        C/O COASTAL PROPERTY  
                  MANAGEMENT  
                  1061 E. INDIANTOWN ROAD SUITE  
                  310  
City-State-Zip: JUPITER FL 33477

Title           PRESIDENT  
Name           PIERSALL, MARY  
Address        C/O COASTAL PROPERTY  
                  MANAGEMENT  
                  1061 E. INDIANTOWN ROAD SUITE  
                  310  
City-State-Zip: JUPITER FL 33477

Title           VP, SECRETARY  
Name           VINCINGUERRA, ROBERT  
Address        C/O COASTAL PROPERTY  
                  MANAGEMENT  
                  1061 E. INDIANTOWN ROAD SUITE  
                  310  
City-State-Zip: JUPITER FL 33477

Title           COO  
Name           KRETT, REGINA  
Address        C/O COASTAL PROPERTY  
                  MANAGEMENT  
                  1061 E. INDIANTOWN ROAD SUITE  
                  310  
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: MARY PIERSALL**

**PRESIDENT**

**04/10/2024**

Electronic Signature of Signing Officer/Director Detail

Date