2025 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 11, 2025
Secretary of State
4907627961CC

DOCUMENT# N94000001171

Entity Name: COVINGTON PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O TAG VENTURES
25 OLD KINGS RD., N. STE 5A
PALM COAST, FL 32137

Current Mailing Address:

C/O TAG VENTURES
25 OLD KINGS RD., N. STE A5
PALM COAST, FL 32137 US

FEI Number: 59-3290081

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

AUSTRINO, KATHY
C/O TAG VENTURES
25 OLD KINGS RD., N. STE 5A
PALM COAST, FL 32137 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: KATHY AUSTRINO 03/11/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	SECRETARY	Title	PRESIDENT
Name	ADKINS, WILLIAM	Name	TAYLOR, JEFFREY
Address	C/O TAG VENTURES 25 OLD KINGS RD., N. STE 5A	Address	C/O TAG VENTURES 25 OLD KINGS RD., N. STE 5A
City-State-Zip:	PALM COAST FL 32137	City-State-Zip:	PALM COAST FL 32137
Title	VP	Title	TREASURER
Name	GILFILIAN, ROBERT	Name	MCDONALD , DENNIS
Address	C/O TAG VENTURES 25 OLD KINGS RD., N. STE 5A	Address	C/O TAG VENTURES 25 OLD KINGS RD., N. STE 5A
City-State-Zip:	PALM COAST FL 32137	City-State-Zip:	PALM COAST FL 32137
Title	DIRECTOR		
Name	MOONEY, JAMES		
Address	C/O TAG VENTURES 25 OLD KINGS RD., N. STE 5A		
City-State-Zip:	PALM COAST FL 32137		

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: JEFFREY TAYLOR PRESIDENT 03/11/2025

Electronic Signature of Signing Officer/Director Detail — Date