

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

DOCUMENT# N94000001763

**Entity Name:** CHAPEL COVE HOMEOWNERS ASSOCIATION, INC.

**FILED**  
**Apr 07, 2023**  
**Secretary of State**  
**7634427170CC**

**Current Principal Place of Business:**

C/O WINNER PROPERTY SERVICES  
5556 S FLAMINGO RD  
COOPER CITY , FL 33330

**Current Mailing Address:**

C/O WINNER PROPERTY SERVICES  
5556 S FLAMINGO ROAD  
COOPER CITY, FL 33330 US

**FEI Number: 65-0512256**

**Certificate of Status Desired: No**

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

WINNER, STEVEN A  
C/O WINNER PROPERTY SERVICES  
5556 S FLAMINGO RD  
COOPER CITY, FL 33330 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: STEVEN A WINNER**

**04/07/2023**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title SECRETARY  
Name BULLARD, BARBARA  
Address C/O WINNER PROPERTY SERVICES  
5556 S FLAMINGO RD  
City-State-Zip: COOPER CITY FL 33330

Title PRESIDENT, TREASURER  
Name OGRON, DARYL  
Address C/O WINNER PROPERTY SERVICES  
5556 S FLAMINGO RD  
City-State-Zip: COOPER CITY FL 33330

Title VP  
Name CLARKE, EDMUNDO  
Address C/O WINNER PROPERTY SERVICES  
5556 S FLAMINGO RD  
City-State-Zip: COOPER CITY FL 33330

*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: DARYL OGRON**

**PRESIDENT**

**04/07/2023**

Electronic Signature of Signing Officer/Director Detail

Date