

2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004630

Entity Name: C/HP COVE, INC.

Current Principal Place of Business:

1090 VERMONT AVENUE NW, SUITE 400
WASHINGTON, DC 20005

Current Mailing Address:

1090 VERMONT AVENUE NW, SUITE 400
WASHINGTON, DC 20005 US

FEI Number: 52-1949584

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

NATIONAL CORPORATE RESEARCH,LTD.,INC.
115 NORTH CALHOUN ST.
SUITE 4
TALLAHASSEE, FL 32301 US

FILED
Apr 27, 2016
Secretary of State
CC6208178643

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:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name BURNS, RICHARD F
Address 1090 VERMONT AVENUE NW, SUITE
 400
City-State-Zip: WASHINGTON DC 20005

Title VP, DIRECTOR
Name CORBETT, JOHN
Address 1090 VERMONT AVENUE NW, SUITE
 400
City-State-Zip: WASHINGTON DC 20005

Title VP, DIRECTOR
Name WIEDORFER, JOSEPH P
Address 1090 VERMONT AVE., N.W., SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title TREASURER
Name PARKINSON, GARY J
Address 1090 VERMONT AVENUE NW, SUITE
 400
City-State-Zip: WASHINGTON DC 20005

Title SECRETARY
Name VACCARO, THOMAS G
Address 1090 VERMONT AVE., N.W., SUITE 400
City-State-Zip: WASHINGTON DC 20005

Title VP
Name MITCHELL, FRED C
Address 1090 VERMONT AVENUE NW, SUITE
 400
City-State-Zip: WASHINGTON DC 20005

Title VP
Name GREEN, STEPHEN M.
Address 1090 VERMONT AVENUE NW, SUITE
 400
City-State-Zip: WASHINGTON DC 20005

Title VP
Name FRY, PATRICK J.
Address 1090 VERMONT AVENUE NW, SUITE
 400
City-State-Zip: WASHINGTON DC 20005

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: THOMAS G. VACCARO

SECRETARY

04/27/2016

Electronic Signature of Signing Officer/Director Detail

Date