

**2013 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N95000004630

**Entity Name:** C/HP COVE, INC.

**Current Principal Place of Business:**

122 EAST 42ND STREET  
SUITE 3605  
NEW YORK, NY 10168

**Current Mailing Address:**

122 EAST 42ND STREET  
SUITE 3605  
NEW YORK, NY 10168 US

**FEI Number:** 52-1949584

**Certificate of Status Desired:** No

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

THE PRENTICE-HALL CORPORATION SYSTEM  
1201 HAYS STREET  
TALLAHASSEE, FL 32301 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:**

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DP  
Name BURNS, RICHARD F  
Address 122 EAST 42ND STREET, SUITE 3605  
City-State-Zip: NEW YORK NY 10168

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

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

Title DV  
Name CORBETT, JOHN  
Address 319 CLEMATIS STREET, SUITE 409  
City-State-Zip: WEST PALM BEACH FL 33401

Title TREASURER  
Name PARKINSON, GARY J  
Address 122 EAST 42ND ST. #3605  
City-State-Zip: NEW YORK NY 10168

Title VP  
Name MITCHELL, FRED C  
Address 122 EAST 42ND STREET, #3605  
City-State-Zip: NEW YORK NY 10068

*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**

**01/11/2013**

Electronic Signature of Signing Officer/Director Detail

Date