

2022 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002056

Entity Name: COVE TOWERS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

430 COVE TOWER DRIVE
OFFICE
NAPLES, FL 34110

Current Mailing Address:

430 COVE TOWER DRIVE
OFFICE
NAPLES, FL 34110 US

FEI Number: 59-3478199

Certificate of Status Desired: Yes

Name and Address of Current Registered Agent:

GOEDE & ADAMCZYK, PLLC
6609 WILLOW PARK DRIVE, #201
NAPLES, FL 34109 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 DIRECTOR, PRESIDENT
Name MCCABE, WILLIAM
Address 430 COVE TOWER DRIVE
OFFICE
City-State-Zip: NAPLES FL 34110

Title DIRECTOR
Name STANTON, MARCIA
Address 430 COVE TOWER DRIVE
OFFICE
City-State-Zip: NAPLES FL 34110

Title DIRECTOR, TREASURER
Name PNIEWSKI, RONALD
Address 430 COVE TOWER DRIVE
OFFICE
City-State-Zip: NAPLES FL 34110

Title DIRECTOR, SECRETARY
Name FOLK, DICK
Address 430 COVE TOWER DRIVE
OFFICE
City-State-Zip: NAPLES FL 34110

Title DIRECTOR, VP
Name DEJONG, WILLIAM
Address 430 COVE TOWER DRIVE
OFFICE
City-State-Zip: NAPLES FL 34110

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: WILLIAM MCCABE

BOARD MEETING

03/07/2022

Electronic Signature of Signing Officer/Director Detail

Date