

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000131

Entity Name: OSPREY COVE HOMEOWNER'S ASSOCIATION OF HOBE SOUND, INC.

FILED
May 13, 2020
Secretary of State
8246466167CC

Current Principal Place of Business:

1111 SE FEDERAL HIGHWAY, #100
STUART, FL 34994

Current Mailing Address:

C/O ADVANTAGE PROPERTY MANAGEMENT
1111 SE FEDERAL HIGHWAY, #100
STUART, FL 34994 US

FEI Number: 65-0926994

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF
759 SW FEDERAL HWY., SUITE 213
STUART, FL 34994 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: SAMMY PIERCE

05/13/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name LALONDE, JEFF
Address C/O ADVANTAGE PROPERTY
 MANAGEMENT
 1111 SE FEDERAL HIGHWAY, #100
City-State-Zip: STUART FL 34994

Title TREASURER
Name ZOEUF, DESPINA
Address C/O ADVANTAGE PROPERTY
 MANAGEMENT
 1111 SE FEDERAL HIGHWAY, #100
City-State-Zip: STUART FL 34994

Title SECRETARY
Name POLITES, JOHN
Address C/O ADVANTAGE PROPERTY
 MANAGEMENT
 1111 SE FEDERAL HIGHWAY, #100
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name BROWN, JIM
Address C/O ADVANTAGE PROPERTY
 MANAGEMENT
 1111 SE FEDERAL HIGHWAY, #100
City-State-Zip: STUART FL 34994

Title DIRECTOR
Name CROMWELL, SUZANNE
Address C/O ADVANTAGE PROPERTY
 MANAGEMENT
 1111 SE FEDERAL HIGHWAY, #100
City-State-Zip: STUART FL 34994

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: JEFF LALONDE

PRESIDENT

05/13/2020

Electronic Signature of Signing Officer/Director Detail

Date