

# 2010 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 549399

FILED  
Mar 09, 2010  
Secretary of State

**Entity Name:** KOVE ASSOCIATION, INC. OF VOLUSIA

**Current Principal Place of Business:**

123 KOVE BLVD  
OSTEEN, FL 327648519 US

**New Principal Place of Business:**

**Current Mailing Address:**

123 KOVE BLVD  
OSTEEN, FL 327648519 US

**New Mailing Address:**

**FEI Number:** 59-1783216

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

COMBS, ALEX B  
232 MEADOWLARK DR.  
OSTEEN, FL 32764 US

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

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

**Election Campaign Financing Trust Fund Contribution ( ).**

**OFFICERS AND DIRECTORS:**

**Title:** P  
**Name:** RICHARDSON, DALE  
**Address:** 130 KOVE BLVD  
**City-St-Zip:** OSTEEN, FL 32764

**Title:** V  
**Name:** JOHNSON, BENNIE O  
**Address:** 89 EAGLE POINT SOUTH  
**City-St-Zip:** OSTEEN, FL 32764

**Title:** V  
**Name:** LATMORE, ROBERT  
**Address:** 808 SWALLOW LN  
**City-St-Zip:** OSTEEN, FL 32764

**Title:** T  
**Name:** SEBASTIAN, VINCENT  
**Address:** 905 BLUE HERON BLVD  
**City-St-Zip:** OSTEEN, FL 32764

**Title:** S  
**Name:** RAPP, MICHAEL  
**Address:** 8 PINE DR  
**City-St-Zip:** OSTEEN, FL 32764

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

**SIGNATURE:** DALE RICHARDSON

P

03/09/2010

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date