2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 708412

FILED Feb 24, 2009 Secretary of State

Entity Name: HARBOR COVE CIVIC ASSOCIATION INC

Current Principal Place of Business: 499 IMPERIAL DRIVE HARBOR COVE NORTH PORT, FL 34287 Current Mailing Address: 499 IMPERIAL DRIVE HARBOR COVE NORTH PORT, FL 34287 Current Mailing Address: 499 IMPERIAL DRIVE HARBOR COVE NORTH PORT, FL 34287 FEI Number 65-0156330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: Name and Address of New Registered Agent: BODWELL, JUNE 558 PARKWOOD AVE NORTH PORT, FL 34287 The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: Title: SD () Delete Name: ZOLLERS, MARY Address: 711 FAIRMONT DR Address: City-St-Zip: NORTH PORT, FL 34287 Title: V () Delete Name: RIBAUDO, VINCENT Address: 717 RIVERVIEW CIR. City-St-Zip: NORTH PORT, FL 34287 Title: V () Delete Name: RIBAUDO, VINCENT Name: RIBAUDO, VINCENT Address: 718 IMPERIAL DR. City-St-Zip: NORTH PORT, FL 34287 Title: V () Change () Addition Name: KUSHNER, JOHN Address: 741 RIVERVIEW Address: 755 IMPERIAL DR. City-St-Zip: NORTH PORT, FL 34287 Title: V () Change () Addition Name: RIBAUDO, VINCENT Nam	Entity Na	Me: HARBOI	R COVE CIVIC ASSOCIAT	ION, ING.			
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499 IMPERIAL DRIVE HARBOR COVE NORTH PORT, FL 34287 FEI Number: 65-0156330 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desir Name and Address of Current Registered Agent: BODWELL, JUNE 558 PARKWOOD AVE NORTH PORT, FL 34287 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent Date OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: Title: SD () Delete Title: () Change () Addition Name: 2OLLER, MARY Address: 711 FAIRMONT DR Address: City-St-Zip: NORTH PORT, FL 34287 City-S	HARBOR	COVE	87				
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Name and Address of Current Registered Agent: BODWELL, JUNE 558 PARKWOOD AVE NORTH PORT, FL 34287 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	HARBOR	COVE	87				
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558 PARKWOOD AVE NORTH PORT, FL 34287 US The above named entity submits this statement for the purpose of changing its registered office or registered agent in the State of Florida. SIGNATURE: Electronic Signature of Registered Agent	Name and	d Address of	Current Registered Ager	t: Name and Addres	s of New Registered Agent:		
Electronic Signature of Registered Agent OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DI Title: SD () Delete Name: ZOLLERS, MARY Address: 711 FAIRMONT DR City-St-Zip: NORTH PORT, FL 34287 Title: P () Delete Name: POWELL, GEORGE Address: 404 BLACKBURN BLVD. City-St-Zip: NORTH PORT, FL 34287 Title: V () Delete Title: V (X) Change () Addition Name: RIBAUDO, VINCENT Name: RIBAUDO, VINCENT Address: 741 RIVERVIEW City-St-Zip: NORTH PORT, FL 34287 Title: V (X) Change () Addition Name: RIBAUDO, VINCENT Address: 741 RIVERVIEW City-St-Zip: NORTH PORT, FL 34287 Title: V (X) Change () Addition Name: RIBAUDO, VINCENT Address: 741 RIVERVIEW City-St-Zip: NORTH PORT, FL 34287 Title: T () Delete Title: () Change () Addition Name: BODWELL, JUNE Name: BODWELL, JUNE Address: 558 PARKWOOD AVE Address: 558 PARKWOOD AVE	NORTH P	ORT, FL 342a		the purpose of changing its registe	ered office or registered agent, or both,		
OFFICERS AND DIRECTORS: Title: SD () Delete Name: ZOLLERS, MARY Address: 711 FAIRMONT DR City-St-Zip: NORTH PORT, FL 34287 Title: P () Delete Name: POWELL, GEORGE Address: 404 BLACKBURN BLVD. City-St-Zip: NORTH PORT, FL 34287 Title: V () Delete Name: RIBAUDO, VINCENT Address: 741 RIVERVIEW City-St-Zip: NORTH PORT, FL 34287 Title: V (X) Change () Addition Name: RIBAUDO, VINCENT Address: 785 IMPERIAL DR. City-St-Zip: NORTH PORT, FL 34287 Title: V (X) Change () Addition Name: RIBAUDO, VINCENT Address: 741 RIVERVIEW City-St-Zip: NORTH PORT, FL 34287 Title: T () Delete Name: BODWELL, JUNE Address: 558 PARKWOOD AVE Address: 558 PARKWOOD AVE Address: 558 PARKWOOD AVE Address: 558 PARKWOOD AVE	SIGNATU		nio Cianaturo et Degistero	J A want	Data		
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	Name: Address:	BODWELL, JU 558 PARKWO	JNE OD AVE	Name: Address:	() Change () Addition		

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: JUNE BODWELL T 02/24/2009