

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90399 010 \*\*\*\*61.25

**DOCUMENT # 713723**

1. Entity Name

QUEEN'S COVE HOUSE CONDOMINIUM CO., INC.



Principal Place of Business

QUEEN'S COVE HOUSE  
5011 N. OCEAN BLVD.  
OCEAN RIDGE FL 33435

Mailing Address

C/O MGMT. SERVICES  
7187 THOMPSON RD  
BOYNTON BEACH FL 33426  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1286162

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

AASKOV, GAIL A  
MANAGEMENT SERVICES  
5011 N OCEAN BLVD  
OCEAN RIDGE FL 33435

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE DS ☐ Delete  
NAME GREENE, DAVID  
STREET ADDRESS 5540 N OCEAN BLVD  
CITY-ST-ZIP OCEAN RIDGE FL 33435

TITLE D ☒ Delete  
NAME FARMER, LOU  
STREET ADDRESS 5540 N OCEAN BLVD  
CITY-ST-ZIP OCEAN RIDGE FL 33435

TITLE DVP ☐ Delete  
NAME SZEPESI, ATILLA  
STREET ADDRESS 5540 N OCEAN BLVD  
CITY-ST-ZIP OCEAN RIDGE FL 33435

TITLE DP ☐ Delete  
NAME BALLAS, HANK  
STREET ADDRESS 5540 N OCEAN BLVD  
CITY-ST-ZIP OCEAN RIDGE FL 33435

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE DT ☐ Change ☒ Addition  
NAME C. Richard Courcy  
STREET ADDRESS 5540 N. Ocean Blvd.  
CITY-ST-ZIP Ocean Ridge, FL 33435

TITLE D ☐ Change ☒ Addition  
NAME Richard Dickson  
STREET ADDRESS 5540 N. Ocean Blvd.  
CITY-ST-ZIP Ocean Ridge, FL 33435

TITLE ☐ Change ☐ Addition  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*[Signature]*

3/24/06

561-276-3220