

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 08, 2007 8:00 am
Secretary of State

02-08-2007 90059 032 ****61.25

DOCUMENT # 714779

1. Entity Name

FISHERMAN'S COVE ASSOCIATION, INC.



Principal Place of Business

9000 BLIND PASS ROAD
SARASOTA FL 34242

Mailing Address

9000 BLIND PASS ROAD
SARASOTA FL 34242

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1232713

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

1st MOORE

CR2E037 (10/06)



6. Name and Address of Current Registered Agent

THE LAW OFFICES OF LOBECK HANSON & WELLS,
P.A. ATTN: KEVIN T WELLS, ESQ.
2033 MAIN ST, SUITE 403
SARASOTA FL 34237

7. Name and Address of New Registered Agent

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, 2007**

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
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Delete
BENDER, DENNIS
413 AUTUMN CHASE DE
VENICE FL 34292

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete
TREASURER
VANDERHOOF, WILLIAM
215 GILMAN ROAD
CHURCHVILLE NY 14428

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete
PRESIDENT
WAUGH, BRUCE
9000 BLIND PASS RD, B106
SARASOTA FL 34242

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete
S
MANGIE, EVELYN
4699 SPRING MEADOW LANE
SARASOTA FL 34239

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
TREASURER
VANDERHOOF, WILLIAM
9000 BLIND PASS RD, B305
SARASOTA, FL 34242

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☒ Change ☐ Addition
PRESIDENT
WAUGH, BRUCE
9000 BLIND PASS RD, B106
SARASOTA, FL 34242

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
☐ Change ☒ Addition
VICE PRESIDENT
DOU DURAN
10465 UNITY ROAD
NEW MIDDLETOWN, OH 44442

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:

William Vanderhoof WILLIAM VANDERHOOF, TREASURER 1/29/07

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

941-346-3467