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Jul 02 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **729039** (8)

1. Corporation Name

CLUB HOUSE COVE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**1100 CRYSTAL LAKE DRIVE
POMPANO FL 33064
US**

**1100 CRYSTAL LAKE DRIVE
POMPANO FL 33064
US**

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

**MILES, JAMES R
7686 WILES ROAD
CORAL SPRINGS FL 33067**

3. Date Incorporated or Qualified

03/04/1974

4. FEI Number

59-1610006

Applied For

Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

5-2-98

12. OFFICERS AND DIRECTORS

☐ DELETE

TITLE **P**
NAME **MASCLANDARO, VIOLET**
STREET ADDRESS **1100 CRYSTAL LAKE DRIVE, # 105**
CITY-ST-ZIP **POMPANO FL 33064**

TITLE **VP**
NAME **LAUR, VIRGINIA**
STREET ADDRESS **1100 CRYSTAL LAKE DRIVE, # 112**
CITY-ST-ZIP **POMPANO FL 33064**

TITLE **D**
NAME **LABELLA, DOROTHY**
STREET ADDRESS **1100 CRYSTAL LAKE DRIVE, # 115**
CITY-ST-ZIP **POMPANO FL 33064**

TITLE **D**
NAME **CARTER, CHARLOTTE**
STREET ADDRESS **1100 CRYSTAL LAKE DRIVE, # 120**
CITY-ST-ZIP **POMPANO FL 33064**

TITLE **D**
NAME **PAES EVANS, LARRY**
STREET ADDRESS **1100 CRYSTAL LAKE DRIVE, # 103**
CITY-ST-ZIP **POMPANO FL 33064**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☒ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

SEC
MARY MCQUIRE
1100 CRYSTAL LAKE DR. 201
POMPANO, FL. 33064

D
MARIE LOPEZ
1100 CRYSTAL LAKE DR 107
POMPANO, FL. 33064

☒ Change ☒ Addition

☐ Change ☒ Addition

☐ Change ☐ Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual reports 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 12 or Block 13 in changed, or on an attachment, with an address.

SIGNATURE:

CR2E037 (10/97)