

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 732498

FILED  
Apr 20, 2010  
Secretary of State

**Entity Name:** COMMODORES COVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1207 N HIMES AVE  
STE 3  
TAMPA, FL 33607 US

**New Principal Place of Business:**

**Current Mailing Address:**

1207 N HIMES AVE  
STE 3  
TAMPA, FL 33607 US

**New Mailing Address:**

**FEI Number:** 59-1778018

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

UNIQUE PROPERTY SERVICE, INC.  
1207 N HIMES AVE  
STE 3  
TAMPA, FL 33607 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

**OFFICERS AND DIRECTORS:**

Title: TD  
Name: JOHNSON, DAN  
Address: 5020 BAYSHORE #601  
City-St-Zip: TAMPA, FL 33611

Title: SD  
Name: PLYLER, HARRIET  
Address: 5020 BAYSHORE BLVD., #501  
City-St-Zip: TAMPA, FL 33611

Title: PD  
Name: VOSS, ANNE  
Address: 5020 BAYSHORE #401  
City-St-Zip: TAMPA, FL 33611

Title: D  
Name: DEMAYO, CLEMENT  
Address: 5020 BAYSHORE BLVD #504  
City-St-Zip: TAMPA, FL 33611

Title: VD  
Name: TRUSCOTT, MICHAEL  
Address: 5020 BAYSHORE BLVD., #404  
City-St-Zip: TAMPA, FL 33611

Title: D  
Name: MILLS, JOHN  
Address: 5020 BAYSHORE BLVD #505  
City-St-Zip: TAMPA, FL 33611

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

SIGNATURE: ANNE VOSS

PD

04/20/2010

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

\_\_\_\_\_  
Date