

2000 UNIFORM BUSINESS REPORT (UBR)

FILED
Feb 20, 2000 8:00 am
Secretary of State

02-20-2000 90031 019 ****61.25

DOCUMENT # 734651

1. Entity Name

TREASURE COVE PROPERTY OWNERS' ASSOCIATION, INCOR

Principal Place of Business

Mailing Address

1475 TREASURE COVE LN
 VERO BEACH FL 32963
 US

1475 TREASURE COVE LANE
 VERO BEACH FL 32963-2506
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-1897063

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required



DO NOT WRITE IN THIS SPACE

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

JACKSON, ROBERT
2L65-15TH AVE.
VERO BEACH FL 32960

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.

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**

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Delete
 NAME **PD FARLEY, JOSEPH**
 STREET ADDRESS **1455 TREASURE COVE LANE**
 CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D MCBRIDE, THOMAS**
 STREET ADDRESS **1496 TREASURE COVE LN**
 CITY-ST-ZIP **VERO BEACH FL**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DVP GREER, GORDON**
 STREET ADDRESS **1425 TREASURE COVE LANE**
 CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **D GILICK, ELIZABETH**
 STREET ADDRESS **1465 TREASURE COVE LANE**
 CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE Change Addition
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DS HAUSLAND, STEPHEN**
 STREET ADDRESS **1420 TREASURE COVE LANE**
 CITY-ST-ZIP **VERO BEACH FL 32963**

TITLE Change Addition
 NAME **stephen HAUSLAND**
 STREET ADDRESS
 CITY-ST-ZIP

TITLE Delete
 NAME **DT VAN HEST, GLENN**
 STREET ADDRESS **1475 TREASURE COVE LAND**
 CITY-ST-ZIP **VERO BEACH FL 32963**

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 exemption stated in Section 119.07(3)(i), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Glenn VAN Hest 2-5-00 (561) 231-2572

CR2E037 (9/99)