

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735005

FILED
Apr 04, 2009
Secretary of State

Entity Name: COVE GARDENS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1260 SE 3RD CT.
APT. 7
DEERFIELD BEACH, FL 33441 US

New Principal Place of Business:

Current Mailing Address:

1112 SE 13TH CT
DEERFIELD BEACH, FL 33441 US

New Mailing Address:

FEI Number: 59-1808695

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FOSTER, MARY
1112 SE 13TH CT
DEERFIELD BEACH, FL 33441 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: PTD () Delete
Name: FOSTER, MARY
Address: 1112 SE 13TH CT
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: D () Delete
Name: PARISI, SARA
Address: 1260 SE 3RD CT #7
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: VSD () Delete
Name: PATTERSON, GEORGE
Address: 1528 SE 12TH CT
City-St-Zip: DEERFIELD BEACH, FL 33441 US

Title: TD () Delete
Name: TURCOVSKI, SUSAN
Address: 1241 SE 4TH ST 15
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: SD () Delete
Name: FLORENCE, COCHRAN
Address: 1261 SE 4TH A #3
City-St-Zip: DEERFIELD BEACH, FL 33411

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: FRIEDMAN, CECELIA
Address: 8210 NW 91ST AVE
City-St-Zip: TAMARAC, FL 33321 US

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further 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 an address, with all other like empowered.

SIGNATURE: SUSAN TURCOVSKI

TD

04/04/2009

Electronic Signature of Signing Officer or Director

Date