

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 735005

FILED
Apr 08, 2012
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:

1240 SE 3RD CT.
APT. 14
DEERFIELD BEACH, FL 33441 US

Current Mailing Address:

506 SW NATURA AVE
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
506 SW NATURA AVE
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
Name: FOSTER, MARY
Address: 506 SW NATURA AVE
City-St-Zip: DEERFIELD BEACH, FL 33441 US

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

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

Title: TD
Name: PARISI, SARA
Address: 1260 SE 3RD CT #7
City-St-Zip: DEERFIELD BEACH, FL 33441

Title: D
Name: TEABOUT, JUDY
Address: 1260 SE 3RD CT #5
City-St-Zip: DEERFIELD BEACH, FL 33411

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: MARY FOSTER

PTD

04/08/2012

Electronic Signature of Signing Officer or Director

Date