

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736551

FILED
Mar 07, 2005
Secretary of State

Entity Name: COVERT III ASSOCIATION, INC.

Current Principal Place of Business:

5211 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228

New Principal Place of Business:

Current Mailing Address:

1150 W. 8TH ST
SUITE 255
CINCINNATI, OH 45203 US

New Mailing Address:

FEI Number: 59-1892899 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAMACK III, WILLIAM H.
27 SOUTH ORANGE AVENUE
SARASOTA, FL 33577 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: STD (X) Delete
Name: HARMELING, BERNARD
Address: 1465 GREENERY DRIVE
City-St-Zip: FLORENCE, KY 41042

Title: VD (X) Delete
Name: SCHAFFIELD, ROBERT
Address: 5210 GULF OF MEXICO DR.
City-St-Zip: LONGBOAT KEY, FL 34228

Title: PD () Delete
Name: KORDIS, BILL
Address: 8831 MONTGOMERY RD
City-St-Zip: CINCINNATI, OH 45236

Title: T () Delete
Name: TAPPAU, CHARLES D
Address: 1150 W. 8TH ST., SUITE 255
City-St-Zip: CINCINNATI, OH 45203

Title: D () Delete
Name: HILL, SARAH H
Address: 649 W. ACACIA RD
City-St-Zip: MILWAUKEE, WI 53217

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: TSD (X) Change () Addition
Name: TAPPAN, CHARLES S
Address: 1150 W. 8TH ST., SUITE 255
City-St-Zip: CINCINNATI, OH 45203

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: CHARLES S TAPPAN

SECY

03/07/2005

Electronic Signature of Signing Officer or Director

_____ Date