2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#736846

FILED Mar 23, 2011 Secretary of State

Entity Name: HOMEOWNERS' ASSOCIATION OF PLUMMERS COVE, INC.

Current Principal Place of Business: New Principal Place of Business:

2762 COVE VIEW DR N

JACKSONVILLE, FL 32257 US

12740-6 ATLANTIC BLVD

JACKSONVILLE, FL 32225 US

Current Mailing Address: New Mailing Address:

2762 COVE VIEW DR N
JACKSONVILLE, FL 32257 US
12740-6 ATLANTIC BLVD
JACKSONVILLE, FL 32225 US

FEI Number: 59-3060294 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

MURRAY, SHERRY
2762 COVE VIEW DR N
12740-6 ATLANTIC BLVD
JACKSONVILLE, FL 32257 US
JACKSONVILLE, FL 32225 US

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: DANILE A GURZI 03/23/2011

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: F

Name: CARSON, IAN

Address: 12740-6 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32225 US

Title: VP

Name: DAWSON, ED

Address: 12740-6 ATLANTIC BLVD City-St-Zip: JACKSONVILLE, FL 32225 US

Title: TREA

Name: BUSSEY, LANE

Address: 12740-6 ATLANTIC BLVD
City-St-Zip: JACKSONVILLE, FL 32225 US

Title:

 Name:
 SCHOEPPEL, PAM

 Address:
 12740-6 ATLANTIC BLVD

 City-St-Zip:
 JACKSONVILLE, FL 32225 US

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: DANIEL A GURZI PRES 03/23/2011