2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#741803

FILED Jul 18, 2009 Secretary of State

Entity Name: THE COVE AT SOUTH BEACHES CONDOMINIUM ASSOCIATION, INC

Littly Nai	HE COVE AT 300TH BEACHES CONDOWN	NIOW ASSOCIATION, IN	O.
Current Principal Place of Business:		New Principal Place of Business:	
4230 S HWY A-1-A P O BOX 510908 MELBOURNE BCH, FL 329517908		137 S. COURTENAY PKWY #683 MERRITT ISLAND, FL 32952	
Current Mailing Address:		New Mailing Address:	
4230 S HWY A-1-A P O BOX 510908 MELBOURNE BCH, FL 329517908		137 S. COURTENAY PKWY #683 MERRITT ISLAND, FL 32952	
In accordanc	ce with s. 607.193(2)(b), F.S., the corporation did not receiv	•	Certificate of Status Desired ()
Name and	Address of Current Registered Agent:	Name and Address	of New Registered Agent:
SPACE COAST PROPERTY MANAGEMENT 645 CLASSIC COURT SUITE 104		TCB PROPERTY MANAGEMENT 137 S. COURTENAY PKWY #683	
MELBOURNE, FL 32940 US		MERRITT ISLAND, FL 32952 US	
	named entity submits this statement for the purpose of Florida.	e of changing its registere	ed office or registered agent, or both,
SIGNATUF	RE: RENAE PETTIT		07/18/2009
	Electronic Signature of Registered Agent		Date
OFFICERS AND DIRECTORS:		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () Delete THORNTON, MATTHEW 2 COVE RD MELBOURNE BEACH, FL 32951	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	T () Delete LEWIS, RHONDA 34 COVE RD MELBOURNE BEACH, FL 32951	Title: Name: Address: City-St-Zip:	() Change () Addition
Title: Name: Address: City-St-Zip:	V () Delete OLER, KEVIN 10 COVE RD MELBOURNE BEACH, FL 32951	Title: Name: Address: City-St-Zip:	() Change () Addition

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: MATTHEW THORNTON P 07/18/2009