

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 18, 2008 08:00 AM
Secretary of State

DOCUMENT # 742599	
1. Entity Name CASTAWAY COVE HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 1320 SHOREWINDS LA VERO BEACH FL 32963	Mailing Address 1320 SHOREWINDS LA VERO BEACH FL 32963
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/07)

4. FEI Number 59-2122367	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HIGGINS, WILLIAM 1065 TOBAGO TERRACE VERO BCH FL 32963-2536	
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7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	FL Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____	(NOTE: Registered Agent signature is not used when retaining)	DATE _____
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FILE NOW: FEE IS \$61.25 Due By May 1, 2008	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
D SMITH, VIRGINIA L 1320 SHOREWINDS LANE VERO BEACH FL 32963-2542	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
S PORTEOUS, DONALD 1033 CRESCENT BEACH RD VERO BEACH FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
BM STANLEY, WILLIAM 1350 BUCCANEER LA VERO BEACH FL 32963	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
P HIGGINS, WILLIAM 1065 TOBAGO TERR VERO BCH FL 32963-2536	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
D MCBRIAN, JAY 1340 BUCCANEER ANE VERO BEACH FL 32963-2536	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete
D LIBERZZI, FRANK 1065 CRESCENT BEACH RD VERO BEACH FL 32963	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
U00000831445 02/27/08-80019-003 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Virginia M Smith* VIRGINIA M SMITH 772-231-5389 2-13-08