

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 745007

FILED  
Mar 05, 2008  
Secretary of State

Entity Name: GULF COVE, INC.

**Current Principal Place of Business:**

19281 SAN CARLOS BLVD.  
FT. MYERS BEACH, FL 33931

**New Principal Place of Business:**

**Current Mailing Address:**

19281 SAN CARLOS BLVD.  
FT. MYERS BEACH, FL 33931

**New Mailing Address:**

FEI Number: 59-1951980

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

SHIELDS, CHRISTOPHER J  
1833 HENDRY STREET  
FORT MYERS, FL 33901 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: D ( ) Delete  
Name: HUFFMAN, LESLIE  
Address: 19281 SAN CARLOS BLVD., LOT 39  
City-St-Zip: FT. MYERS BEACH, FL 33931

Title: P ( ) Delete  
Name: WINEGARDNER, RONALD  
Address: 19281 SAN CARLOS BLVD., LOT 17  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D ( ) Delete  
Name: MACER, PAUL  
Address: 19281 SAN CARLOS BLVD #6  
City-St-Zip: FT. MYERS, FL 33931

Title: V ( ) Delete  
Name: MILLER, VERA  
Address: 19281 SAN CARLOS BLVD, LOT 23  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: D ( ) Delete  
Name: DENZEL, ARLEND  
Address: 19281 SAN CARLOS BLVD, LOT 46  
City-St-Zip: FORT MYERS BEACH, FL 33931

Title: STD ( ) Delete  
Name: HUBATCHEK, DARLENE F  
Address: 19281 SAN CARLOS BLVD., #37  
City-St-Zip: FT. MYERS BEACH, FL 33931

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

Title: D (X) Change ( ) Addition  
Name: WERNER, MITCHELL  
Address: 19281 SAN CARLOS BLVD #43  
City-St-Zip: FT. MYERS, FL 33931

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

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

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

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: DARLENE F. HUBATCHEK

STD

03/05/2008

Electronic Signature of Signing Officer or Director

Date