2002 UNIFORM BUSINESS REPORT (UBR)

FILED
Apr 01, 2002 8:00 am
Secretary of State
04-01-2002 90060 010 ****61.25

0097535

DOCUMENT # 746876

1. Entity Name

COVE SPRINGS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4805 ALT. 19 NORTH PALM HARBOR FL 34683 US	8056 OLD C.R. 54 NEW PORT RICHEY FL 34653 US

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2685890 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

JOHNSON, KIM
C/O COMMUNITY MANAGEMENT SERVICES, INC.
~~8400 MASSACHUSETTS AVENUE, SUITE B-3~~
NEW PORT RICHEY FL 34653

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

8056 Old C.R. 54

City New Port Richey FL Zip Code 34653

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.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P PUCCI, JOHN 4805 ALT 19 N #525 PALM HARBOR FL 34683	☒ Delete	PD Lula T. Klingler 4805 Alt 19 N., #111 Palm Harbor, FL 34683	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V KING, HOWARD 4805 ALT 19 N., #412 PALM HARBOR FL 34683	☐ Delete	VD Gladys Holmes 4805 Alt 19 N., #217 Palm Harbor, FL 34683	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T STAPLETON, MARGARET 4805 ALT 19 N., #423 PALM HARBOR FL 34683	☒ Delete	TD Gerry Brownfield 4805 Alt 19 N., #612 Palm Harbor, FL 34683	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PUCCI, JOHN 4805 ALT 19 N. #111 PALM HARBOR FL 34683	☒ Delete	D Robert Merilli 1524 Monroe Ave Altona, PA 16602	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LAW, WARREN 2967 HARRISBURG RD. STONY CREEK NY 12878	☐ Delete		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S PRIMM, CHARLES P.O. BOX 270553 TAMPA FL 33688	☐ Delete		☐ Change ☐ Addition

CR2E037 (9/01)

12. I hereby certify that the information supplied with this filing does not qualify 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 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: SIGNATURE REQUIRED Lula T. Klinger 3-22-02 (727)375-9880
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #