

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749200

FILED  
Apr 26, 2004  
Secretary of State

**Entity Name:** FISHERMAN'S COVE HOMEOWNERS ASSOCIATION SECTION ONE, INC.

**Current Principal Place of Business:**

4398 SE HAMILTON LN  
STUART, FL 34997 US

**New Principal Place of Business:**

15 SE MILLWOOD TERR  
STUART, FL 34997 US

**Current Mailing Address:**

4398 SE HAMILTON LN  
STUART, FL 34997 US

**New Mailing Address:**

15 SE MILLWOOD TERR  
STUART, FL 34997 US

FEI Number: 59-1944318

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

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

CARBONE, MARK  
4398 SE HAMILTON LN  
STUART, FL 34997

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

PROCKO, STEVE  
15 SE MILLWOOD TERR  
STUART, FL 34997

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: STEVE PROCKO

04/26/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: T ( ) Delete  
Name: CARBONE, MARK  
Address: 4398 SE HAMILTON LANE  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: SHRINER, SHIRLEY  
Address: 12 SE KENKA TERR  
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete  
Name: CARBONA, JOANN  
Address: 4398 SE HAMILTON LN  
City-St-Zip: STUART, FL 34997

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

Title: P (X) Change ( ) Addition  
Name: PROCKO, STEVE  
Address: 15 SE MILLWOOD TERR  
City-St-Zip: STUART, FL 34997 US

Title: T (X) Change ( ) Addition  
Name: PROCKO, PAULA  
Address: 15 SE MILLWOOD TERR  
City-St-Zip: STUART, FL 34997 US

Title: S (X) Change ( ) Addition  
Name: REINHARDT, WILLIAM JR.  
Address: 4 SE MEAD PLACE  
City-St-Zip: STUART, FL 34997 US

I hereby certify that the information supplied with this filing does not qualify for the 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 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: STEVE PROCKO

P

04/26/2004

Electronic Signature of Signing Officer or Director

Date