## 2005 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

**DOCUMENT# 751405** 

FILED May 13, 2005 Secretary of State

Entity Name: THE COVE TOWNHOUSE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

3119 S.W. 27TH AVENUE 1172 S. DIXIE HWY

MIAMI, FL 33133 CORAL GABLES, FL 33146

Current Mailing Address: New Mailing Address:

3119 S.W. 27TH AVENUE 1172 S. DIXIE HWY

MIAMI, FL 33133 CORAL GABLES, FL 33134

FEI Number: 59-2059535 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

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

DE LA CRUZ, LUIS F
95 MERRICK WAY
SUITE 440

DE LA CRUZ, LUIS F
2 ALHAMBRA PLAZA
PH2-C

CORAL GABLES, FL 33134 US CORAL GABLES, FL 33134 US

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: LUIS F. DE LA CRUZ JR 05/13/2005

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PTD ( ) Delete Title: PTD (X) Change ( ) Addition

Name:METCALF, FREDERICK,Name:GARCIA-DUFFOUR, JOSEAddress:3119 S.W. 27TH AVENUEAddress:1172 S. DIXIE HWY

City-St-Zip: MIAMI, FL City-St-Zip: CORAL GABLES, FL 33146

Title: SD ( ) Delete Title: S (X) Change ( ) Addition Name: POPHAM, DAVID, Name: ALVAREZ, ANTONIO

 Address:
 3115 S.W. 27TH AVENUE
 Address:
 1172 S. DIXIE HWY

 City-St-Zip:
 MIAMI, FL
 City-St-Zip:
 CORAL GABLES, FL 33146

Title: D ( ) Delete Title: VPD (X) Change ( ) Addition

 Name:
 MCCOY, DAVID,
 Name:
 BALAGUE-ROCA, DOLORES

 Address:
 3166 COMMODORE PLAZA
 Address:
 1172 S. DIXIE HWY

 City-St-Zip:
 COCONUT GROVE, FL
 City-St-Zip:
 CORAL GBALES, FL 33146

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: JOSE GARCIA-DUFFOUR PTD 05/13/2005