

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752071

FILED
Apr 01, 2005
Secretary of State

Entity Name: COVE CAY VILLAGE IV CONDOMINIUM ASSOCIATION, INC

Current Principal Place of Business:

3500 COVE CAY DRIVE
CLEARWATER, FL 33760 US

New Principal Place of Business:

Current Mailing Address:

3500 COVE CAY DR
CLEARWATER, FL 33760 US

New Mailing Address:

FEI Number: 59-1988406 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PAUGROSSI, GERALD T LCAM
3500 COVE CAY DRIVE
CLEARWATER, FL 33760 US

Name and Address of New Registered Agent:

PANAGROSSI, GERALD T LCAM
3500 COVE CAY DRIVE
CLEARWATER, FL 33760 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: GERALD T. PANAGROSSI

04/01/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: RALSTON, EUGENE
Address: 2900 COVE CAY DRIVE, 6E
City-St-Zip: CLEARWATER, FL 33760

Title: SD () Delete
Name: HOESCH, PAULA
Address: 2900 COVE CAY DR., 3E
City-St-Zip: CLEARWATER, FL 33760

Title: TD () Delete
Name: ANDERSON, DONALD C
Address: 3200 COVE CAY DR
City-St-Zip: CLEARWATER, FL 33760

Title: VD () Delete
Name: WILLIAMS, EDGAR
Address: 3200 COVE CAY DR 3E
City-St-Zip: CLEARWATER, FL 33760

Title: PD () Delete
Name: HAUER, YOLANDA
Address: 3300 COVE CAY DRIVE 5F
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

Title: VD (X) Change () Addition
Name: FORGRAV E, DONNA
Address: 3E00 COVE CAY DR 5A
City-St-Zip: CLEARWATER, FL 33760

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

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: DONALD C. ANDERSON

TD

04/01/2005

Electronic Signature of Signing Officer or Director

Date