2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 08, 2012
Secretary of State

DOCUMENT# 753385

Entity Name: THE COVE AT LAKE MIRA HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3960 LAKE MIRA DR
ORLANDO, FL 32817

New Principal Place of Business:

Current Mailing Address:

P O BOX 1804
GOLDENROD, FL 32733

New Mailing Address:

FEI Number: 26-2670784 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BUHRMANN, ROBERT
3960 LAKE MIRA DR.
ORLANDO, FL 32817 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: P
Name: CHAMBERS, BUDDY
Address: 4101 LAKE MIRA DR.
City-St-Zip: ORLANDO, FL 32817

Title: VP
Name: TARR, RON
Address: 4064 LAKE MIRA DR
City-St-Zip: ORLANDO, FL 32817

Title: T
Name: BUHRMANN, ROBERT
Address: 3960 LAKE MIRA CT.
City-St-Zip: ORLANDO, FL 32817

Title: S
Name: COSTELLO, MIMI
Address: 3917 LAKE MIRA DR.
City-St-Zip: ORLANDO, FL 32817

Title: D
Name: SMITH, KEVIN
Address: 8536 SIDON ST.
City-St-Zip: ORLANDO, FL 32817

Title: D
Name: KAMMER, RAY
Address: 8530 SIDON ST
City-St-Zip: ORLANDO, FL 32817

I hereby 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 all other like empowered.

SIGNATURE: ROBERT BUHRMANN TREA 01/08/2012

Electronic Signature of Signing Officer or Director — Date