2002 UNIFORM BUSINESS REPORT (UBR)

FILED Feb 25, 2002 8:00 am Secretary of State DOGUMENT # **755057** 1. Entity Name QUEENS COVE PROPERTY OWNERS ASSOCIATION, INC. 02-25-2002 90082 019 ****70.00 Principal Place of Business Mailing Address 134 QUEENS ROAD 134 QUEENS ROAD FT PIERCE FL 34949 FT PIERCE FL 34949 2. Principal Place of Business 3. Mailing Address QUEENS KOAD 34 Suite, Apt. #, etc. Suite, Apt. #, etc. DO NOT WRITE IN THIS SPACE Applied For City & State City & State 4. FEI Number ITCH INSON 59-2265997 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name (SAME) Street Address (P.O. Box Number is Not Acceptable) LEVINE, JAY STEVEN 2500 NORTH MILITARY TRAIL 490 SUITE 在 490 Zip Code City BOCÁ RATON FL 33431 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 Signature, typed or printed name of registered agent and title if applicable. DATE (NOTE: Registered Agent signature required when reinstating) Œ 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. П Added to Fees **Department of State** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11 10. Change ☐ Addition Delete TITLE NOREWS, DIANE L. NAME NAME andrews, diane l 114 QUEEN ANN CT STREET ADDRESS STREET ADDRESS 114 QUEEN ANN COURT CITY-ST-ZIP HUTCHINSON ISLAND, FL 34949 CITY-ST-ZIP <u>Hutchinson Island Fl 34949</u> Delete TITLE TITLE SD LANGER, NORBERT E. SR. NAME NAME RILEY. DOROTHY 121 QUEEN ANN CT. STREET ADDRESS STREET ADDRESS 136 COMMONWEALTH COURT CITY-ST-ZIP CITY-ST-ZIP HUTCHINSON ISLAND <u>HUTCHINSON ISLAND FL 34949</u> TITLE **V**ア┣ニヤ゙゙ Delete TITLE VPD MILLER, JAY NAME NAME DODDS, JAMES STREET ADDRESS 121 QUEENS KD STREET ADDRESS 119 QUEEN FREDERIKA COURT CITY-ST-ZIP CITY-ST-ZIP FT PIERCE FL TITLE TITLE Delete SCHUSTER NAME NAME scott, John 116 QUEEN EUGLNIA CT. STREET ADDRESS STREET ADDRESS 128 QUEEN CHRISTINA COURT 34949 CITY-ST-7IP CITY-ST-ZIP <u>HUTCHINSON ISLAND FL 34949</u> Addition Change Delete TITLE SCHULT NAME MACGRATH, JUDY NAME CORT

12. Thereby certify that the information supplied with this filling 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of 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 in the corporation of the receiver of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and the corporation of the receiver of the corporation of the receiver of the corporation of the receiver of the receiver of the corporation of the receiver of the recei changed, or on an attachment with an address, with all other like empower

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

📿 Delete

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

NAME

131 PARLIAMENT COURT

DONALDSON, DON

fort pierce fl

HUTCHINSON ISLAND FL 34949

138 COMMONWEALTH COURT

138 COMMONWEALTH CI

HUTCHINSON ISLAND

DONALDSON, DON

15 CASTLE

Change

ISLAND, FL

(9/01

CR2E037

Attachment Document #

Attachment to 2002 UNIFORM BUSINESS REPORT

DOCUMENT #755057

755057

D Addition Galli, John 85 Queens Rd Hutchinson Island, FL 34949

D Addition Schildwachter, Ric 121-Queen Frederika Court Hutchinson Island, FL 34949

D Addition Sorce, Marc 20 Sovereign Way Hutchinson Island, FL 34949