## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## **Secretary of State DOCUMENT #755057** 02-13-2006 90008 047 \*\*\*\*61.25 QUEENS COVE PROPERTY OWNERS ASSOCIATION. INC. Principal Place of Business Mailing Address 134 QUEENS ROAD 134 QUEENS ROAD HUTCHINSON ISLAND, FL 34949-8348 US HUTCHINSON ISLAND, FL 34949-8348 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01102006 Chq-NP CR2E037 (11/05) City & State Applied For City & State 4. FEI Number 59-2265997 Not Applicable Zip Country 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 LEVINE, JAY STEVEN ESQ. Street Address (P.O. Box Number is Not Acceptable) 2500 NORTH MILITARY TRAIL STE, 490 BOCA RATON, FL 33431 City Zip Code 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. I am familiar with, and accept the obligations of registered agent. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to П Due by May 1, 2006 Trust Fund Contribution Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ☐ Change ☐ Addition Charles Wood SCHULT, CURT NAME NAME 123 Queen ANN 15 CASTLE CT. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP HUTCHINSON ISLAND, FL 34949 Ft Pièrce Fu CITY, ST. 7IP TITLE ☐ Delete TITLE ☐ Addition SCHILDWACHTER, ERIC F NAME NAME STREET ADDRESS 121 QUEEN FREDERIKA CT STREET ADDRESS CITY-ST-ZIP HUTCHINSON ISLAND, FL 34949 CITY-ST-7P SD TITLE ☐ Delete ☐ Change ☐ Addition DEBOLT, DWIGHT NAME NAME STREET ADDRESS 122 QUEEN ANN CT STREET ADDRESS CITY-ST-ZIP HUTCHINSON ISLAND, FL. 34949 CITY-ST-ZIP TITLE VD. ☐ Delete TITLE ☐ Change Addition FREY, MICHAEL NAME NAME STREET ADDRESS 55 SOVEREIGN WAY STREET ADDRESS HUTCHINSON ISLAND, FL 34949 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ AdditIon KNAGGS, RON NAME MALKE STREET ADDRESS 133 QUEEN CHRISTINA CT STREET ADDRESS HUTCHINSON ISLAND, FL. 34949 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition Don Jatt NAME GONZALEZ, TONY MAKE 115 Queen Cotherna STREET ADDRESS 45 SOVEREIGN WAY STREET ADDRESS ft Pierce Fr 34949 CITY-ST-7IP HUTCHINSON ISLAND, FL 34949 CITY-ST-ZIP

Ronky

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FILED

Feb 13, 2006 8:00 am

<sup>12.</sup> I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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 if changed, or on an attachment with an address, with all other like empowered.