## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

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INTED NAME OF SIGNING OFFICER OR DIRECTOR

## Apr 28, 2005 8:00 am Secretary of State **DOCUMENT #757641** 04-28-2005 90217 016 \*\*\*\*61.25 1. Entity Name COVE PLACE PROPERTY OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 14006485 SE COBIA WAY PO BOX 6198 STUART, FL 34997 US STUART, FL 34997 TIS 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03232005 Chg-NP CR2E037 (10/03) 4. FEI Number 59-2264841 Applied For City & State City & State Not Applicable Ζip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired П Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent U Janagemer NOYES, ROBERT 212 SW KANNER HWY STUART, FL 34997 **6648** かかん 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. SIGNATUR Stringture, typedic remide hams of registered agent and the diagon capital (NGTs, Hogisto od Agon) signaturo required vinem e notatingo Filing Fee is \$61.25 9. Election Campaign Financing **\$5.00** May Be Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by May 1, 2005 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. DIVP TD TITLE TITLE ☐ Change Addition 🔽 Delete NOYES, ELIZABETH White, Albert NAME NAME 212 SW KANNER WAY 3570 SE CODIA Way Stewal Pl 34997 STREET ADDRESS STREET ADDRESS CITY ST ZIP STUART, FL 34997 CITY ST ZIP Frank 34997 PD ひいこ Addition TITLE 😾 Delete TITLE ☐ Change Phillips Don 3572 SE Colora Way Stuart FL 34997 NOYES, ROBERT LAME NAME STREET ADDRESS 212 SW KANNER HIGHWAY STREET ADDRESS CITY ST ZIF STUART, FL CITY ST ZIP ☐ Change Addition TITLE Delete TITLE Miraglia, Many 3553 SE Cobie Way Stuart, PC 34997 NAME RICHARDS, HELEN NAME STREET ADDRESS 3550 SE COBIA WAY STREET ADDRESS CITY ST 7IP STUART, FL 34997 CITY ST 7/P Change VPD ☐ Delete TITLE Addition TULLE JOHNSON, PAUL Johnson, Paul 3584 SE Cobia LAME NAME STREET ADDRESS 3582 SE COBIA WAY STREET ADDRESS CITY ST ZIP STUART, FL 34007 CITY ST ZIP **∀** Change TITLE Delete TITLE Addition CALL, GREG NAME NAME STREET ADDRESS 3592 SE COBIA WAY STREET ADDRESS STUART, FL 34997 CITY ST 7IP CITY ST ZIP Addition TITLE ☐ Delete Change TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY ST ZIP CITY ST ZIP 12. Thereby certify that the information supplied with this filing 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 if changed, or on an attachment with an address, with all other like empowered.

**FILED**