

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762713

FILED
Apr 27, 2007
Secretary of State

Entity Name: INTERNATIONAL COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

14227 ISLAMORADA DR
STE A
ORLANDO, FL 34237 US

New Principal Place of Business:

Current Mailing Address:

14227 ISLAMORADA DR
STE A
ORLANDO, FL 34237 US

New Mailing Address:

FEI Number: 20-2309617 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

HOSPITALITY MANAGEMENT & ADVISORS GROUP
14227 ISLAMORADA DR
STE A
ORLANDO, FL 34237 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 () Delete
Name: STEINBECK, RANDY
Address: 7400 CANADA AVE
City-St-Zip: ORLANDO, FL 32819

Title: V (X) Delete
Name: CIBOTTI, ANDRES
Address: 6400 CARRIER DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: S (X) Delete
Name: GORDON, JOHN
Address: 6165 CARRIER DRIVE
City-St-Zip: ORLANDO, FL 32819

Title: T () Delete
Name: GOODERMOTE, DAVID JR
Address: 7400 CANADA AVE
City-St-Zip: ORLANDO, FL 32819

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

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: RANDY STEINBECK

P

04/27/2007

Electronic Signature of Signing Officer or Director

_____ Date