FILED
Apr 14, 2003 8:00 am
Secretary of State

04-14-2003 90338 037 ****61.25

2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 764468

1. Entity Name
AQUA COVE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
8420 AQUA COVE LANE FT MYERS, FL 33903	8420 AQUA COVE LANE FT MYERS, FL 33903

2. Principal Place of Business
Suite, Apt. #, etc.
City & State
Zip Country

3. Mailing Address
Suite, Apt. #, etc.
City & State
Zip Country

☒ CHECK HERE IF MAKING CHANGES

4. FEI Number 59-2378028 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BUBAR, ROBERT
8420 AQUA COVE LANE
FT MYERS, FL 33903

7. Name and Address of New Registered Agent

Name: CAROlyN STOUT
Street Address (P.O. Box Number is Not Acceptable): 8390 Agua Cove LN
City: N FT MYERS FL Zip Code: 33903

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: Carolyn Stout 4/8/03
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25

9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP BUBAR, ROBERT 8420 AQUA COVE LANE FT MYERS, FL 33903	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TERESA CAIKINS 8400 Agua Cove LN N FT MYERS, Fl 33903	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV BAKER, BRIAN 8410 AQUA COVE LANE FT MYERS, FL 33903	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	BRETT Vogelbach 8415 Agua Cove LN N FT MyeRS Fl 33903	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	DT STOUT, CAROLYN 8390 AQUA COVE LANE FT MYERS, FL 33903	☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS HABAYEB, LOUISE 8431 AQUA COVE LANE FORT MYERS, FL 33903	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY ST ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (1/02)

12. I hereby 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.

SIGNATURE: Carolyn Stout 4/8/03 239-656-4121
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #