2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED May 28, 2008 8:00 am Secretary of State

DOCUMENT # 764560 1. Entity Name LIGHTHOUSE COVE COMMUNITY ASSOCIATION, INC.									05-28-20	08 90013	045 ****6	1.25
1406 N. OCEAN BLVD. 1406				ng Address 06 N. OCEAN BLVD. MPANO BEACH, FL 33062			. (80))) (80)	alist Black Blill Gl	iek wwii wewii wewii	11012 210 11 210 11 0 20	III(n) ne ind i	
Principal Place of Business - No P.O. Box # 3. Maili				Mailing Address	iling Address							
Suite, Apt. #, etc. Sui				Suite, Apt. #, etc.	ite, Apt. #, etc.			04082008	Chg-NP	CR2E	037 (12/06)	
City & State				City & State	ity & State			4. FEI Number Applied For 59-2491924 Not Applicable				
Zip	Country					ntry	5. Certificate of Status De				\$8.75 Add Fee Require	
5. Name and Address of Current Registered Agent								7. Name and	'Address of N	ew Registered	Agent	
SLAMAN, ROBERT A 4646 W IRLO BRONSON MEM HWY KISSIMMEE, FL 34746						Name Street Address (P.O. Box Number is Not Acceptable)						
NIGORALIATE 141											,	
		City					F	Zip Cod	e			
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												
Filing Fee is \$61.25 9. Election C						inancing	,	. \$5.00 мау В	e	Make_che	ck payablė t	0 .
	Due by Ma	Trust Fund (Trust Fund Contribution.			Added to Fees Florida Department of State						
10.		OFFICERS	S AND DIRECTO)RŚ	11.		7	ADDITIONS/CH.	ANGES TO OF	FICERS AND D	DIRECTORS IN	l 10
TITLE	PD										Change	☐ Addition
NAME	DAN MCKALLAGAT 1406 N OCEAN BLVD			N.		-						
STREET ADDRESS CITY-ST-ZIP	POMPANO BEACH, FL				ET ADDRESS - ST - ZIP							
TITLE	VD			™ Defete	Delete TITLE		VD				☐ Change	Addition
NAME	KAPLAN, RUBIA			Delete	NAM		LIN	DA BU	IRNS KEAN		criange	Z
STREET ADDRESS	1406 N OCEAN BLVD				STRE		140	6 N. C	CEAN	BLVD		
CITY-ST-ZIP	POMPANO BEACH, FL				CITY		Pon	1 OMAGA	36 ACH	, FL	33062	
TITLE	STD			☐ Delete	TITLE	:				•	☐ Change	☐ Addition
NAME	BRENNAN, JAMES				NAME STREET							
STREET ADDRESS CITY-ST-ZIP	1406 N OCEAN BLVD POMPANO BEACH, FL 33062											
		BEACH, FL	33062			-ST-ZIP						
TITLE	VD ZACCARO, FRANK			L_J Delete	Delete TITLE						☐ Change	☐ Addition
NAME STREET ADDRESS	1				NAME							
CITY-ST-ZIP	POMPANO BEACH, FL 33062				CITY-							
TITLE				☐ Delete	TITLE						Change	Addition
NAME					NAM							
STREET ADDRESS						ET ADDRESS						
CITY-ST-ZIP					CITY	-ST-ZIP						
TITLE				☐ Delete	TITLE			-			☐ Change	Addition

12. 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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS CITY-ST-ZIP

Me Kolley A phature and typed or printed name of signing officer or director

Date

Daytime Phone #