2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

May 08, 2007 8:00 am Secretary of State **DOCUMENT # 768932** 05-08-2007 90007 005 ****61.25 PORT CARLOS COVE, INCORPORATED Principal Place of Business Mailing Address 1802 MAIN STREET FORT MYERS BEACH FL 33931 1802 MAIN STREET FORT MYERS BEACH FL 33931 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/06) City & State City & State 4 FEI Number Applied For 59-2234528 Not Applicable 7in Country Zip 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 SHIELDS, CHRIS Street Address (P.O. Box Number is Not Acceptable) 1833 HENDRY ST. FORT MYERS FL 33901 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 remstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2007 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. ☐ Change ■ Addition Delete DHE TILLE WIESENAUER, Robert NAME WIZSZNAUSE, ROBERT STREET ADDRESS 95 Blackbaind Way STREET ADDRESS 95 BLACKSAND WAY CITY-ST-ZIP FORT MYERS BEACH FL 33931 CITY-S1-ZIP 72 MYERS BEACH ☐ Change ☐ Addition Delete TITLE NAME NAME HOBOT, RICHARD STREET ADDRESS STREET ADDRESS 91 BLACKBEARD WAY CHY-S1-7IP 111Y-S1-ZIP FT MYERS BEACH FL 33931 ☐ Change ■ Addition TITLE THE Celete VD NAMI NAME ARENdt, William KZAN, JOHN Myras Brack , 72 33931 STREET ADDRESS STREET ADDRESS 77 CORTEZ WAY CITY-ST-ZIP CITY-SI-ZIP FORT MYERS BEACH FL 33931 Delete MARSHAll, Muriel ☐ Change ☐ Addition HILE SD NAME NAME MILLERT, VIRGINIA 8) Black brand Way HMy 32931 STREET ADDRESS STREET ADDRESS 28 DOUBLOON WAY CITY-ST-ZIP CITY-ST-7IP FORT MYERS BEACH FL 33931 Detete ☐ Change Addition TITLE TITLE NAME TRIPLEHORN, BEVERLY NAME STREET ADDRESS STREET ADDRESS 15371 TAHITIAN DR CITY-SI-ZIP CITY-ST-ZIP FORT MYERS FL 33908 ☐ Delete TITLE Change ☐ Addition TITLE NAME STREET ADDRESS STREET ADDRESS CHY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 Statutos; 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.

CER OR DIRECTOR

SIGNATURE:

FILED

Daytime Phone #