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Apr 14, 2008 8:00 am
Secretary of State

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DOCUMENT # 769843				State of Florida 04-14-2008 90048 027 ****70.00	
1. Entity Name PILOT'S COVE PROPERTY OWNERS' ASSOCIATION, INC.		Principal Place of Business DAVID GOLFORD 8 S. SEWALL'S PT RD STUART, FL 34996 US		Mailing Address P O BOX 8603 HOBE SOUND, FL 33455 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address		40067998	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		04102008 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-2448881	
Zip		Country		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent GALFOND, DAVID 8 S SEWALL'S PT RD STUART, FL 34996				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL 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 _____ (NOTE: Registered Agent signature required when reappointing) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
PD KAGHAN, KATHY 8241 SE PILOTS COVE TERRACE HOBE SOUND, FL 33455 <input type="checkbox"/> Delete		P.D. Joseph Silva 8001 SE P. Lot's Cove Terrace Hobe Sound FL 33455 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
T SILVA, JOSEPH 8001 SE PILOTS COVE HOBE SOUND, FL 33455 <input type="checkbox"/> Delete		T Jean Koperski 8145 SE Pilots Cove Terrace Hobe Sound, FL 33455 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
VP ONEGUA, WILLIAM M 8313 SE PILOTS COVE TERRACE HOBE SOUND, FL 33455 <input type="checkbox"/> Delete		VP William ONUSKA 8313 SE P. Lot's Cove Terrace Hobe Sound, FL 33455 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP			
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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.					
SIGNATURE: <u>Joseph Silva</u> Joseph Silva 4/11/08 (561)758-1539					