

**2008 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 17, 2008 08:00 A
Secretary of State

DOCUMENT # M68428

1. Entity Name

ISLAND COVE DEVELOPMENT, INC.



Principal Place of Business

% ALEXANDER H. BOBINSKI
1351 N. COURTENAY PKWY. SUITE AA
MERRITT ISLAND, FL 32953-1464

Mailing Address

% ALEXANDER H. BOBINSKI
1351 N. COURTENAY PKWY. SUITE AA
MERRITT ISLAND, FL 32953-1464



03112008 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

59-2906982

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BOBINSKI, ALEXANDER H.
1351 N. COURTENAY PKWY.
SUITE AA
MERRITT ISLAND, FL 32953

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2008 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE DPT
NAME BOBINSKI, ALEXANDER H.
STREET ADDRESS 1351 N COURTENAY PKWY AA
CITY-ST-ZIP MERRITT ISLAND, FL

TITLE SD
NAME STARKEY, CAROL JEAN
STREET ADDRESS 1365 N. COURTENAY PKWY., STE C
CITY-ST-ZIP MERRITT ISLAND, FL

TITLE
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CITY-ST-ZIP

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CITY-ST-ZIP

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IN THIS SPACE**

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04/02/08-80024-009 150.00

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 607, 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/12/08

Date

321-452-4552

Daytime Phone #