2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2006 8:00 am
Secretary of State
05-03-2006 90235 018 ****61.25

DOCUMENT # N00000006776

1. Entity Name
THE COVE AT FRENCH VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
300 ARAGON AVE., SUITE 210 CORAL GABLES, FL 33134	300 ARAGON AVE., SUITE 210 CORAL GABLES, FL 33134

2. Principal Place of Business	3. Mailing Address
Miami Management, Inc.	Miami Management, Inc
Suite, Apt. #, etc.: 1145 Sawgrass Corp. Pkwy	Suite, Apt. #, etc.: 1145 Sawgrass Corp. Pkwy
City & State: Sunrise, Fl	City & State: Sunrise, Fl
Zip: 33323 Country: Broward	Zip: 33323 Country: Broward

04202006 Chg-NP CR2E037 (11/05)

4. FEI Number 65-0729654 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FERRY, STEVEN 700 S STATE ROAD PLANTATION, FL 33317	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 _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

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	P OCARIZ, CYNTHIA 7900 NW 6TH ST. #205 PEMBROKE PINES, FL 33024	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P, Sánchez-Gómez, Adriana 680 NW 79th Terr, 104 Pembroke Pines, Fl 33024	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD GOMEZ, ADRIAN S 680 N.W. 79 TERRACE #104 PEMBROKE-PINES, FL 33024	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T, VP Balducci Ricardo Luis 640 NW 79 Ave, 104 Pembroke Pines, Fl 33024	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RICHARDS-MOHAMED, TASHI 7920 NW 6TH ST. #205 PEMBROKE PINES, FL 33024	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HEARN, GREGORY N 7900 NW 6TH ST. #204 PEMBROKE PINES, FL 33024	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ESCOBAR, ALEX 7910 NW 6TH ST. #201 PEMBROKE PINES, FL 33024	☒ 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

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: Adriana Sánchez Gómez 4/20/06 954-655-0422
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

Adriana Sanchez Gómez