

2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000005290

FILED
Feb 23, 2011
Secretary of State

Entity Name: AUBURN COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285

New Principal Place of Business:

C/O ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285 US

Current Mailing Address:

C/O ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285

New Mailing Address:

C/O ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285 US

FEI Number: 65-1121969

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ARGUS MANAGEMENT OF VENICE, INC.
181 CENTER ROAD
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: P
Name: WASHBURN, JUDY
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

Title: VP
Name: MCLAUGHLIN, BEVERLY
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

Title: S
Name: GRAHAM, LAURA
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

Title: T
Name: WINKELMAN, PAUL
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

Title: D
Name: JOHNSON, JOHN
Address: 181 CENTER ROAD
City-St-Zip: VENICE, FL 34285 US

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHAUN O'GRADY

CAM

02/23/2011

Electronic Signature of Signing Officer or Director

_____ Date