## 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02843

FILED Mar 15, 2011 Secretary of State

Entity Name: COVE CAY COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

2619 COVE CAY DRIVE CLEARWATER, FL 33760

Current Mailing Address: New Mailing Address:

2619 COVE CAY DRIVE CLEARWATER, FL 33760

FEI Number: 59-2512284 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

COVE CAY COMMUNITY ASSOC., INC. 2619 COVE CAY DRIVE CLEARWATER, FL 33760 US

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: PD

 Name:
 FROLICK, LUANNE

 Address:
 2618 COVE CAY DR., #706

 City-St-Zip:
 CLEARWATER, FL 33760

Title: VD

Name: DIMASI, ROBERT
Address: 3400 COVE CAY DR., #7H
City-St-Zip: CLEARWATER, FL 33760

Title: SD

 Name:
 HENDRIX, BETTY

 Address:
 2617 COVE CAY DR., #504

 City-St-Zip:
 CLEARWATER, FL 33760

Title: T

 Name:
 MOGAVERO, BEVERLY

 Address:
 2620 COVE CAY DRIVE, #901

 City-St-Zip:
 CLEARWATER, FL 33760

Title: LCAM

Name: MCNAUGHTON, JOHN LCAM
Address: 2500 1ST AVE NORTH
City-St-Zip: ST PETERSBURG, FL 33713

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: JOHN MCNAUGHTON LCAM 03/15/2011