

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001037

FILED  
Mar 03, 2012  
Secretary of State

**Entity Name:** PALM COVE TOWNHOMES H.O.A., INC.

**Current Principal Place of Business:**

19803 GULF BLVD  
INDIAN SHORES, FL 33785 US

**New Principal Place of Business:**

**Current Mailing Address:**

19803 GULF BLVD  
INDIAN SHORES, FL 33785 US

**New Mailing Address:**

**FEI Number:** 26-0062817

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

CERCEK, LISA K AGENT  
19455 GULF BLVD.  
8A  
INDIAN SHORES, FL 33785 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:** VP  
**Name:** RILEY, ROBERT  
**Address:** 19803 GULF BLVD #503  
**City-St-Zip:** INDIAN SHORES, FL 33785 US

**Title:** P  
**Name:** ALEJANDRO, NELSON  
**Address:** 19803 GULF BLVD # 101  
**City-St-Zip:** INDIAN SHORES, FL 33785 US

**Title:** S/T  
**Name:** GOODMAN, DAVE  
**Address:** 19803 GULF BLVD #301  
**City-St-Zip:** INDIAN SHORES, FL 33785 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:** N. ALEJANDRO

P

03/03/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date