2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000010943

Entity Name: COUNTRY COVE ESTATES ASSOCIATION, INC.

FILED Apr 15, 2009 Secretary of State

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

% PHOENIX MANAGEMENT 3082 JOG ROAD LAKE WORTH, FL 33467

Current Mailing Address: New Mailing Address:

% PHOENIX MANAGEMENT % PHOENIX MANAGEMENT SERVICES, INC. 3082 JOG ROAD 4082 JOG ROAD 4082 LAKE WORTH, FL 33467 4082 LAKE WORTH, FL 33467

FEI Number: 56-2427858 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:

RESENTHAL, DAVID

% PHOENIX MANAGEMENT

3082 JOG ROAD

LAKE WORTH, FL 33467 US

ROSENTHAL, DAVID

% PHOENIX MANAGEMENT SERVICES INC.

3082 JOG ROAD

LAKE WORTH, FL 33467 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: DAVID ROSENTHAL 04/15/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 P () Delete
 Title:
 P (X) Change () Addition

 Name:
 CUMMIS, MARC
 Name:
 CUMMIS, MARC

 Address:
 6063 POND BLUFF CT
 Address:
 6063 POND BLUFF CT.

Address: 6063 POND BLUFF CT Address: 6063 POND BLUFF CT.
City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

Title: T () Delete Title: VP (X) Change () Addition Name: GORDON, ELLIOT Name: GORDON, ELLIOT

Address: 6070 COUNTRY ESTATES DR Address: 6070 COUNTRY ESTATES DR. City-St-Zip: LAKE WORTH, FL 33467 City-St-Zip: LAKE WORTH, FL 33467

Title: VP () Delete Title: T (X) Change () Addition

 Name:
 LOBBAN, NORMAN
 Name:
 ESTRADA, VICTOR

 Address:
 9162 OLA ALLEY DR
 Address:
 9174 OAK ALLEY DR.

 City-St-Zip:
 LAKE WORTH, FL 33467
 City-St-Zip:
 LAKE WORTH, FL 33467

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: MARC CUMMIS P 04/15/2009