

2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000007425

FILED
Jan 10, 2012
Secretary of State

Entity Name: COVENANT COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

12620-3 BEACH BLVD. BOX 317
JACKSONVILLE, FL 32246

New Principal Place of Business:

Current Mailing Address:

12620-3 BEACH BLVD. BOX 317
JACKSONVILLE, FL 32246

New Mailing Address:

FEI Number: 20-3461877 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CANNON, GINO
12620-3 BEACH BLVD. BOX 317
JACKSONVILLE, FL 32246 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: CANNON, GINO
Address: 12620-3 BEACH BLVD. BOX 317
City-St-Zip: JACKSONVILLE, FL 32246

Title: V
Name: SKOWFOE, MIKE
Address: 12620-3 BEACH BLVD. BOX 317
City-St-Zip: JACKSONVILLE, FL 32246

Title: S
Name: FARR, KEIA
Address: 12620-3 BEACH BLVD. BOX 317
City-St-Zip: JACKSONVILLE, FL 32246

Title: T
Name: ROMANO, TERESA
Address: 12620-3 BEACH BLVD. BOX 317
City-St-Zip: JACKSONVILLE, FL

Title: D
Name: BRUNE, JIM
Address: 12620-3 BEACH BLVD. BOX 317
City-St-Zip: JACKSONVILLE, FL 32246

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: GINO P. CANNON

PRES

01/10/2012

Electronic Signature of Signing Officer or Director

Date