

# 2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000009660

FILED  
Feb 17, 2010  
Secretary of State

**Entity Name:** CAPE CORAL COVE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

1751 FOUR MILE COVE PARKWAY  
CAPE CORAL, FL 33990

**New Principal Place of Business:**

**Current Mailing Address:**

1751 FOUR MILE COVE PARKWAY  
CAPE CORAL, FL 33990

**New Mailing Address:**

**FEI Number:** 20-3657520

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

KATZMAN GARFINKEL ROSENBAUM  
1501 NORTHWEST 49TH ST., STE. 202  
FT LAUDERDALE, FL 33309 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:** PATERSON, LISA  
**Address:** 420 LEXINGTON AVENUE  
**City-St-Zip:** NEW YORK, NY 10170

**Title:** S/T  
**Name:** GOLBERSTEIN, RAPHAEL  
**Address:** 420 LEXINGTON AVENUE  
**City-St-Zip:** NEW YORK, NY 10170

**Title:** D  
**Name:** GUAETTA, VINCENT  
**Address:** 1763 FOUR MILE COVE PARKWAY, #611  
**City-St-Zip:** CAPE CORAL, FL 33990

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:** LISA PATERSON

P

02/17/2010

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

\_\_\_\_\_  
Date