

# **2010 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N06000008981

**FILED**  
**Apr 19, 2010**  
**Secretary of State**

**Entity Name:** THE HOMES AT ANTIGUA COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

C/O 611 DESTINY DR.  
RUSKIN, FL 33570

**New Principal Place of Business:**

**Current Mailing Address:**

C/O 611 DESTINY DR.  
RUSKIN, FL 33570

**New Mailing Address:**

**FEI Number:** 20-5440198

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired (X)**

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

NEWHART, ROBERT  
611 DESTINY DRIVE  
RUSKIN, FL 33570 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:** DP  
**Name:** NEWHART, ROBERT  
**Address:** 611 DESTINY DR.  
**City-St-Zip:** RUSKIN, FL 33570

**Title:** DT  
**Name:** MEADVIN, KEN  
**Address:** 12800 UNIVERSITY DR., SUITE 400  
**City-St-Zip:** FT. MYERS, FL 33907

**Title:** DS  
**Name:** LAMPITT, KEITH  
**Address:** 12800 UNIVERSITY DR., SUITE 400  
**City-St-Zip:** FT. MYERS, FL 33907

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:** ROBERT NEWHART

DP

04/19/2010

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

\_\_\_\_\_  
Date