

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 24, 2007 8:00 am
Secretary of State

5/

05-01-2007 90032 006 ****61.25

DOCUMENT # N09739

1. Entity Name
ANCHOR COVE MASTER ASSOCIATION, INC.



Principal Place of Business
**5901 SUN BLVD.
SUITE 200
SAINT PETERSBURG, FL 33715 US**

Mailing Address
**5901 SUN BLVD.
SUITE 200
SAINT PETERSBURG, FL 33715 US**

66016487



04262007 Chg-NP CR2E037 (12/06)

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
59-2596451

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

WRIGHT, DAVID RESOURCE PROPERTY MGMT
5901 SUN BLVD.
SUITE 200
SAINT PETERSBURG, FL 33715

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agents signature required when renewing)

DATE

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
PD
MAIETTA, JOSEPH
404 MADEIRA CIRCLE, #404
TIERRA VERDE, FL 33715

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
GREG PENTER
363 PINELLAS BAYWAY #48
TIERRA VERDE FL 33715

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
HANSER, JOHN
330 MADEIRA CIRCLE, #330
TIERRA VERDE, FL 33715

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP
D
JOHNSON, RALPH
363 PINELLAS BAYWAY S, #41
SAINT PETERSBURG, FL 33715

☒ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Delete

TITLE
NAME
STREET ADDRESS
CITY- ST- ZIP

☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Carol Blinn

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-26-07 727-864-0004

Date

Daytime Phone #