

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N10485

FILED
Jun 29, 2009
Secretary of State

Entity Name: COVE HARBOR I CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

324 E. BEACH DR.
PANAMA CITY, FL 32401

New Principal Place of Business:

Current Mailing Address:

324 E. BEACH DR.
PANAMA CITY, FL 32401

New Mailing Address:

FEI Number: 59-2850856 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

TURK, WAYNE
324 EAST BEACH DRIVE # 502
PANAMA CITY, FL 32401 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: VP () Delete
Name: DOLBEER, WILLIAM J
Address: 324 E. BEACH DR 604
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: BAXLEY, JAMES
Address: 324 E BEACH DR 104
City-St-Zip: PANAMA CITY, FL 32401

Title: S () Delete
Name: CRUTCHFIELD, CHARLES
Address: 324 E BEACH DR # 103
City-St-Zip: PANAMA CITY, FL 32401

Title: P () Delete
Name: TURK, WAYNE
Address: 324 E BEACH DR 502
City-St-Zip: PANAMA CITY, FL 32401

Title: D () Delete
Name: CURREN, NEAL
Address: 324 E BEACH DR 601
City-St-Zip: PANAMA CITY, FL 32401

Title: T () Delete
Name: DOLBEER, MARTHA A
Address: 324 E. BEACH DR. 604
City-St-Zip: PANAMA CITY, FL 32401

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: MARTHA DOLBEER

T

06/29/2009

Electronic Signature of Signing Officer or Director

_____ Date