NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

May 04, 1999 8:00 am § Secretary of State

05-04-1999 90110 035 ****61.25

A REALTHRAC AND CLARA LANGE RANGE AND FRANCE REAL ALDER ALTHOUGH AND CONTRACT REAL AND CONTRACT AND CONTRACT

DOCUMENT # N17502

1. Corporation Name

ADMIRAL'S COVE SINGLE FAMILY HOMEOWNERS ASSOCIAT ION, INC.

Principal Place of Business 200 ADMIDALS COVE BLVD

Mailing Address

200 ADMIRALS COVE BLVD

JUPITER FL 33477	JUPITER FL 33477	
2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualifed

21		26			10/24/1986				
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number Applied For				
22		27			59-2741392 Not Applicable				
	City & State		City & State		5. Certifcate of Status Desired \$8.75 Additional Fee Required				
23	Zip Country	28	Zip Country	,	6. Election Campaign Financing \$5.00 May Be				
24	25	29	30		Trust Fund Contribution Added to Fees				
	9. Name and Address of Current I	Regis	tered Agent	10. Name and Address of New Registered Agent					
					Name				
	ADMIRALS COVE MGMT 200 ADMIRALS COVE BLVD				Street Address (P.O. Box Number is Not Acceptable)				
	•								
	JUPITER FL 33477		84	1	City FL 85 Zip Code				

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. Lam familiar with and accept the obligations of Section 617.0503. Florida Statutes

m tamiliar with, and accept the obligations of Section 6	17.0505, Florida	Statutes.			,	
Standura hand or printed name of registered agent and title if sonlicable	(NOTE: Re	distand Agent signature n	equired when reinstating)	DATE		
OFFICERS AND DIRECTORS	(11	13.		IGES TO OFFICERS A	ND DIRECTOR	RS IN 12
PD E	DELETE	1.1 TITLE			Change	☐ Addition
· ·		1,2 NAME				
		1.3 STREET ADDRESS				
		1.4 CITY-ST-ZIP				
	DELETE	2.1 TITLE			Change	Addition
SHEEHAN, DICK		2.2 NAME				
· ·	~	2.3 STREET ADDRESS	ISO THE PERSON NAMED IN COLUMN		ردست مر جهستان مر ردست	-
JUPITER FL		2. 4 CITY-ST-ZIP				
STD	DELETE	3.1 TITLE			Change	☐ Addition
THOMAS, FRANKEL		3.2 NAME			•	
		3.3 STREET ADDRESS				•
JUPITER FL		3.4. CITY-ST-ZIP		·		
<u>D</u>	DEFELE	4.1 TITLE			☐ Change	Addition
HOLMES, ROBER W		4, 2 NAME				
181 COMMODORE DR	/	4.3 STREET ADDRESS				
JUPITER FL 33477		4.4 CITY-ST-ZIP				
D	DELETE	5.1 TITLE			Change	Addition
FRANK, BRUCE S		5.2 NAME	IRVING DEC	TER		
392 EAGLE DR		5.3 STREET ADDRESS	418 MARINER	. DK		
JUPITER FL 33477		5.4 CITY-ST-ZIP	Jupiter, Fl	L 3347	·	
	DELETE	6.1 TITLE	,	•	☐ Change	☐ Addition
,		62 NAME				
		6.3 STREET ADDRESS				
	Signature, typed or printed name of registered egent and title if applicable. OFFICERS AND DIRECTORS PD MAKRANSKY, JACK 200 ADMIRALS COVE BLVD. JUPITER FL VD SHEEHAN, DICK 200 ADMIRALS COVE BLVD. JUPITER FL STD THOMAS, FRANKEL 200 ADMIRALS COVE BLVD. JUPITER FL D HOLMES, ROBER W 181 COMMODORE DR JUPITER FL 33477 D FRANK, BRUCE S 392 EAGLE DR JUPITER FL 33477	Signature, typed or printed name of registered egent and title if applicable. OFFICERS AND DIRECTORS PD	OFFICERS AND DIRECTORS PD	Signature, typed or printed name of registered egent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHAN PD DELETE MAKRANSKY, JACK 200 ADMIRALS COVE BLVD. JUPITER FL VD SHEEHAN, DICK 200 ADMIRALS COVE BLVD. JUPITER FL 21 TITLE STD DELETE 3.1 TITLE 3.2 NAME 3.2 NAME 3.2 NAME 3.2 NAME 3.3 STREET ADDRESS JUPITER FL 3.4 CITY-ST-ZIP DELETE DELETE JUPITER FL DELETE A1TITLE 4.1 TITLE 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS JUPITER FL 3.4 CITY-ST-ZIP DELETE THOMAS, ROBER W 181 COMMODORE DR JUPITER FL 33477 DELETE 5.3 STREET ADDRESS 5.3 STREET ADDRESS 4.4 CITY-ST-ZIP TUPITER FL 33477 DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TUPITER FL 33477 DELETE 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP TUPITER FL 33477	Signature. Typed or printed name of registaned agent and title if applicable. (NOTE: Registaned Agent signature required when reinstating) PD OFFICERS AND DIRECTORS PD MAKRANSKY, JACK 200 ADMIRALS COVE BLVD. JUPITER FL VD SHEEHAN, DICK 22 NAME 200 ADMIRALS COVE BLVD. JUPITER FL STD DELETE THOMAS, FRANKEL 200 ADMIRALS COVE BLVD. JUPITER FL STD DELETE 3.1 TITLE 3.2 NAME 3.2 STREET ADDRESS 3.4 CITY-ST-ZIP DELETE DELETE A TITLE 4.2 NAME 4.2 NAME 4.2 NAME 4.2 NAME 4.3 STREET ADDRESS JUPITER FL ST. TUPITER FL DELETE THOMAS, ROBER W 181 COMMODORE DR JUPITER FL ST. TUPITER FL A STREET ADDRESS JUPITER FL ST. TUPITER ST. ST. TUPITER ST.	Signature, typed or printed name of registared agent and title of applicable. (NOTE: Registared Agent algorithme required when reinstating) DATE

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if chair

SIGNATURE: