2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19454

Apr 23, 2012 Secretary of State

Entity Name: COUNTRY CLUB COVE MAINTENANCE ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

C/O DAVENPORT PROF. PROP. MGMT. INC. 6620 LAKE WORTH ROAD. SUITE F LAKE WORTH, FL 33467

New Mailing Address: Current Mailing Address:

C/O DAVENPORT PROF. PROP. MGMT. INC. 6620 LAKE WORTH ROAD. SUITE F LAKE WORTH, FL 33467

FEI Number: 59-2805412 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

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

ST. JOHN, ROSSIN, BURR & LEMME P.A. 1601 FORUM PLACE SUITE 701 WEST PALM BEACH, FL 33401 US

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:

ROBINSON, JOSEPH Name: Address: 6620 LAKE WORTH RD. STE F City-St-Zip: LAKE WORTH, FL 33467

Title:

Name: NEWBOLD, ROBERT

Address: 6620 LAKE WORTH RD. STE F City-St-Zip: LAKE WORTH, FL 33467

Title: PD

WALKER, ALMA Name:

Address: 6620 LAKE WORTH RD. STE F City-St-Zip: LAKE WORTH, FL 33467

Title:

Name: VANDEVENDER, ELIZABETH 6620 LAKE WORTH RD. STE F Address: City-St-Zip: LAKE WORTH, FL 33467

VPD Title:

Name: UTRATA, DALE

6620 LAKE WORTH RD. STE F Address: City-St-Zip: LAKE WORTH, FL 33467

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: A. WALKER PD 04/23/2012