2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 28, 2011
Secretary of State

DOCUMENT# N39202

Entity Name: ACADEMY COVE HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

126 VARSITY CIRCLE
ALTAMONTE SPRINGS, FL 32714

New Principal Place of Business:

Current Mailing Address:

PO BOX 161634
ALTAMONTE SPRINGS, FL 32716

New Mailing Address:

FEI Number: 59-3136138 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

LANE, KAREN
126 VARSITY CIRCLE
ALTAMONTE SPRINGS, FL 32714 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: P
Name: LANE, KAREN
Address: 126 VARSITY CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: VP
Name: KALKHURST, LINDA
Address: 147 VARSITY CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: TR
Name: APPLEGATE, VICTORIA
Address: 207 VARSITY CIRCLE
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: VICTORIA APPLEGATE TR 03/28/2011
Electronic Signature of Signing Officer or Director Date