

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40827

FILED  
Feb 14, 2012  
Secretary of State

**Entity Name:** RIGEL'S COVE HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

4895 MARINER VILLAGE LN  
STUART, FL 34997 US

**New Principal Place of Business:**

**Current Mailing Address:**

4895 MARINER VILLAGE LN  
STUART, FL 34997 US

**New Mailing Address:**

**FEI Number:** 65-0336788

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROSENBAUM MOLLENGARDEN JANSSEN & SIRACUSA  
250 AUSTRALIAN AVE SOUTH  
SUITE 500  
WEST PALM BEACH, FL 33401 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:** VPD  
**Name:** HOLT, ED  
**Address:** 4259 N.E. RIGELS COVE WAY  
**City-St-Zip:** JENSEN BEACH, FL 34957 US

**Title:** PD  
**Name:** LICHT, JACK  
**Address:** 4171 N.E. RIGELS COVE WAY  
**City-St-Zip:** JENSEN BEACH, FL 34957 US

**Title:** SD  
**Name:** CRAWFORD, JOHN  
**Address:** 4149 N.E. RIGELS COVE WAY  
**City-St-Zip:** JENSEN BEACH, FL 34957 US

**Title:** TD  
**Name:** MONDO, ROBERT  
**Address:** 4237 N.E. RIGELS COVE WAY  
**City-St-Zip:** JENSEN BEACH, FL 34957

**Title:** D  
**Name:** ED, KOLOS  
**Address:** 3588 NE OCEAN BLVD  
**City-St-Zip:** JENSEN BEACH, FL 34957 US

**Title:** D  
**Name:** GEBAL, VICTOR  
**Address:** 4193 NE RIGEL'S COVE WAY  
**City-St-Zip:** JENSEN BEACH, FL 34957 US

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:** JACK LICHT

PRES

02/14/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date