2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47072

FILED Feb 03, 2008 Secretary of State

Entity Name: MARINA COVE HOMEOWNERS ASSOCIATION AT THE VILLAGE OF HIGHLANDS RIDGE, INC.

	rincipal Place of Business:	New Principal Place of Business:
	ATERVIEW DRIVE RK, FL 33825 US	
urrent M	ailing Address:	New Mailing Address:
	ATERVIEW DRIVE RK, FL 33825 US	
El Number:	65-0321051 FEI Number Applied For ()	FEI Number Not Applicable () Certificate of Status Desired ()
ame and	Address of Current Registered Agent	: Name and Address of New Registered Agent:
29 VERŚ.	LEE JAY AILLES DR STE 103), FL 32751 US	
	named entity submits this statement for the of Florida.	he purpose of changing its registered office or registered agent, or both,
IGNATUF	RE:	
	Electronic Signature of Registered	Agent Date
FFICERS	S AND DIRECTORS:	ADDITIONS/CHANGES TO OFFICERS AND DIRECTOR
tle: ame: ldress: ty-St-Zip:	PD () Delete ABBEY, KEITH 2924 E WATERVIEW DR AVON PARK, FL 33825	Title: () Change () Addition Name: Address: City-St-Zip:
ame: Idress:	VD () Delete PRICKETT, DAN 2860 S DRIFTWOOD CT AVON PARK, FL 33825 US	Title: () Change () Addition Name: Address: City-St-Zip:
tle: ame: ddress: tty-St-Zip: tle: ame: ddress: tty-St-Zip:	PRICKETT, DAN 2860 S DRIFTWOOD CT	Name: Address:
ame: ldress: ty-St-Zip: lle: ame: ldress:	PRICKETT, DAN 2860 S DRIFTWOOD CT AVON PARK, FL 33825 US SD () Delete RUBLE, NANCY 2869 E SPINNAKER DRIVE	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address:
ame: Idress: Ity-St-Zip: Ide: Ide: Ide: Ide: Idress: Ity-St-Zip: Ide: Ide: Ide: Ide: Ide: Ide: Idess:	PRICKETT, DAN 2860 S DRIFTWOOD CT AVON PARK, FL 33825 US SD () Delete RUBLE, NANCY 2869 E SPINNAKER DRIVE AVON PARK, FL 33825 US TD () Delete SEKELY, MARTHA 2901 E FAIRWAY VISTA DR	Name: Address: City-St-Zip: Title: () Change () Addition Name: Address: City-St-Zip: Title: TD (X) Change () Addition Name: KONRAD, MARK Address: 2801 S. DRIFTWOOD CT.

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: MARK KONRAD TD 02/03/2008