

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2008 8:00 am
Secretary of State

02-14-2008 90030 001 ****61.25

DOCUMENT # N93000000128 1. Entity Name REGENCY COVE ASSOCIATION, INC.			
Principal Place of Business C/O CASTLE GROUP 15200 JOG ROAD, SUITE 205 DELRAY BEACH, FL 33446		Mailing Address C/O CASTLE GROUP 15200 JOG ROAD, SUITE 205 DELRAY BEACH, FL 33446	
2. Principal Place of Business - No P.O. Box # CAMPBELL @ CORAL LAKES Suite, Apt. #, etc. 12751 EL CLAIR RANCH RD City & State BOYNTON BEACH, FL Zip 33437		3. Mailing Address SAME Suite, Apt. #, etc. City & State Zip PAUM BOH	
4. FEI Number 65-0388460		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SCHNER, LARRY E P.A. 750 S. DIXIE HIGHWAY BOCA RATON, FL 33432		7. Name and Address of New Registered Agent Street Address (P.O. Box Number is Not Acceptable) City & State Zip	
8. 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. I am familiar with, and accept the obligations of registered agent.			
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make check payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KAYE, MARTIN 12562 CORAL LAKES DRIVE BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2nd VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition SILVIA SALTZ 12636 CORAL LAKES DR. BOYNTON BEACH, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1V GASMAN, IRWIN 6430 PEBBLE CREEK WAY BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3rd VICE PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition JULES GRONICH 6415 PEBBLE CRK WAY BOYNTON BEACH, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD LEVIN, DICK 6372 TIARA DRIVE BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	4th V-PRESIDENT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition RITA SCHREFF 12715 CORAL LAKES DR. BOYNTON BEACH, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WERBLE, PHILLIP 12643 CORAL LAKES DRIVE BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PARLAMENTARIAN <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition IRU SALTMAN 12649 CORAL LAKES DR. BOYNTON BEACH, FL 33437
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ATD MOSS, HAROLD 12851 CORAL LAKES DRIVE BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOSS, MORTON 12478 CORAL LAKES DR BOYNTON BEACH, FL 33437	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.			
SIGNATURE: <i>[Signature]</i>		Date 2/7/08 Daytime Phone # (361) 628-1181	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			