

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 24, 2006 8:00 am**  
**Secretary of State**

04-24-2006 90413 029 \*\*\*\*61.25

**DOCUMENT # N94000003660**

1. Entity Name

LONG COVE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

200 EXECUTIVE WAY  
#111  
PONTE VEDRA FL 32082  
US

Mailing Address

PO BOX 2055  
PONTE VEDRA FL 32004  
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-3255512

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

EWING, JOHN T  
200 EXECUTIVE WAY  
STE 111  
PONTE VEDRA FL 32082

Name

Street Address (P.O. Box Number is Not Acceptable)

City

**FL**

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$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 V ☐ Delete  
NAME LAWRENCE, KELLY  
STREET ADDRESS 1588 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE P ☒ Change ☐ Addition  
NAME LARRY KELLY  
STREET ADDRESS 1588 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA, FL 32082

TITLE ST ☐ Delete  
NAME RUSSELL, LORRAINE  
STREET ADDRESS 1577 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE VP ☐ Change ☒ Addition  
NAME MIKE NEELY  
STREET ADDRESS 1600 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA, FL 32082

TITLE D ☒ Delete  
NAME FITTING, WILLIAM  
STREET ADDRESS 1597 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA BEACH FL 32082

TITLE ST ☐ Change ☒ Addition  
NAME MARTHA PARK  
STREET ADDRESS 1569 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA, FL 32082

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☒ Change ☐ Addition  
NAME LORRAINE RUSSELL  
STREET ADDRESS 1577 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA, FL 32082

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME DAVID BLACKMAN  
STREET ADDRESS 1592 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA, FL 32082

TITLE ☐ Delete  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE D ☐ Change ☒ Addition  
NAME PEGGY THOMAS  
STREET ADDRESS 1553 HARBOUR CLUB DRIVE  
CITY-ST-ZIP PONTE VEDRA, FL 32082

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:** *Lawrence Kelly*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/5/6 904-280-7616  
Date Daytime Phone #