


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 12, 2007 8:00 am
Secretary of State

02-12-2007 90089 037 ****61.25

DOCUMENT # N94000004190 1. Entity Name DOLPHIN COVE CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 100 MADRID BLVD. STE. 311 PUNTA GORDA, FL 33950		Mailing Address 6025 TAYLOR RD 2 PUNTA GORDA, FL 33950	
2. Principal Place of Business - No P.O. Box # 6025 Taylor Rd		3. Mailing Address Suite, Apt. #, etc. 2	
City & State Punta Gorda FL		City & State Punta Gorda FL	
Zip 33950		Country USA	
4. FEI Number 59-3294467		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 STAR HOSPITALITY MANAGEMENT 6025 TAYLOR RD STE 2 PUNTA GORDA, FL 33950		7. Name and Address of New Registered Agent 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 _____ <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, 2007		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 SHAW, ROBERT R 24521 DOLPHIN COVE DR. PUNTA GORDA, FL 33955	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Vice President Richard Cunningham 24531 Dolphin Cove Dr # 6 Punta Gorda, FL 33955
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD HAMILTON, RICHARD 24590 DOLPHIN COVE DR PUNTA GORDA, FL 33955	TITLE NAME STREET ADDRESS CITY - ST - ZIP	President Richard Hamilton 24590 Dolphin Cove Dr # 4 Punta Gorda, FL 33955
TITLE NAME STREET ADDRESS CITY - ST - ZIP	STD HONICKMAN, STEPHEN 24511 DOLPHIN COVE DR. PUNTA GORDA, FL	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	Change 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: <u>Richard L. Cunningham</u> <u>Richard Cunningham</u> <u>2-6-07</u> <u>941-575-6592</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>			

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