

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

**FILED**  
**Mar 16, 2006 8:00 am**  
**Secretary of State**

03-16-2006 90436 001 \*\*\*\*61.25  
 03-16-2006 90436 002 \*\*\*\*\*8.75



**DOCUMENT # N95000002137**

1. Entity Name

**THE NANTUCKET COVE TOWNHOMES CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business

7016 SW 48TH LANE  
 MIAMI FL 33155  
 US

Mailing Address

7016 SW 48TH LANE  
 MIAMI FL 33155  
 US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

**NO-T APPLICABLE**

Applied For

Not Applicable

5. Certificate of Status Desired



**\$8.75 Additional Fee Required**

1st MOORE

CR2E037 (10/05)



6. Name and Address of Current Registered Agent

**CALDWELL, J. ALEXANDER**  
 7016 SW 48TH LANE  
 MIAMI FL 33155

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

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

TITLE: ~~VPD~~  Delete  
 NAME: ~~HABBERSHOW, SIMON~~  
 STREET ADDRESS: ~~3260 GIFFORD LANE~~  
 CITY-ST-ZIP: ~~MIAMI FL 33133~~

TITLE: STD  Delete  
 NAME: CALDWELL, J. ALEXANDER  
 STREET ADDRESS: 7016 SW 48TH LANE  
 CITY-ST-ZIP: MIAMI FL 33155

TITLE: ~~VPD~~  Delete  
 NAME: ~~COREGHINI, ALEX~~ Cerenghini  
 STREET ADDRESS: 3283 SW ~~PIFFORD~~ Gifford LANE  
 CITY-ST-ZIP: MIAMI FL 33133

TITLE: VPD  Delete  
 NAME: Charles Stuhr  
 STREET ADDRESS: 3281 SW Gifford Lane  
 CITY-ST-ZIP:

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Delete  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

TITLE:  Change  Addition  
 NAME:  
 STREET ADDRESS:  
 CITY-ST-ZIP:

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:

*Charles Stuhr*

3/6/06