

# 2011 NOT-FOR-PROFIT CORPORATION REINSTATEMENT

DOCUMENT# N96000005658

FILED  
Apr 06, 2011  
Secretary of State

**Entity Name:** THE COVE PROPERTY OWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

5703 MAIN STREET  
NEW PORT RICHEY, FL 34652

**New Principal Place of Business:**

2141 LAKEVIEW DRIVE  
SEBRING, FL 33870

**Current Mailing Address:**

5703 MAIN STREET  
NEW PORT RICHEY, FL 34652

**New Mailing Address:**

2141 LAKEVIEW DRIVE  
SEBRING, FL 33870

**FEI Number:** 59-3430806

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROGERS, ALTON D  
5703 MAIN STREET  
NEW PORT RICHEY, FL 34652 US

**Name and Address of New Registered Agent:**

RHOADES, CLIFFORD R  
2141 LAKEVIEW DRIVE  
SEBRING, FL 33870 US

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.

SIGNATURE: CLIFFORD R RHOADES

04/06/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SMITH, DON MCQUEEN  
Address: 4701 VILLA MARE' LANE  
City-St-Zip: NAPLES, FL 34103

Title: VD  
Name: GRAVES, DEBRA K  
Address: 124 LAGONI LANE  
City-St-Zip: LAKE PLACID, FL 33852

Title: STD  
Name: PAHL, JOHN R  
Address: 160 LAGONI LANE  
City-St-Zip: LAKE PLACID, FL 33852

I hereby 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 all other like empowered.

SIGNATURE: DON MCQUEEN SMITH

PD

04/06/2011

Electronic Signature of Signing Officer or Director

Date