

2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT**FILED**
Apr 17, 2009
Secretary of State

DOCUMENT# N97000002056

Entity Name: COVE TOWERS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O INTEGRATED PROPERTY MGMT, INC
3435 10TH STREET N, #201
NAPLES, FL 34103 US**New Principal Place of Business:****Current Mailing Address:**C/O INTEGRATED PROPERTY MGMT, INC
3435 10TH STREET N, #201
NAPLES, FL 34103 US**New Mailing Address:****FEI Number:** 59-3478199**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**ROSS, BYRON
6700 LONE OAK BLVD
NAPLES, FL 34109 US**Name and Address of New Registered Agent:**SAMOUCÉ, ROBERT C
5405 PARK CENTRAL COURT
NAPLES, FL 34109 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: ROBERT C. SAMOUCÉ

04/17/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: FEEHRER, RUSS
Address: 425 COVE TOWERS DR, #1403
City-St-Zip: NAPLES, FL 34110

Title: DVP () Delete
Name: BASILE, MIKE
Address: 420 COVE TOWER DR., #402
City-St-Zip: NAPLES, FL 34110

Title: DT () Delete
Name: COVERDALE, LINDA
Address: 425 COVE TOWER DR., #501
City-St-Zip: NAPLES, FL 34110

Title: D () Delete
Name: GETTY, TERRY
Address: 430 COVE TOWER DR. #503
City-St-Zip: NAPLES, FL 34110

Title: DS () Delete
Name: MAURER, TOM
Address: 430 COVE TOWER DR., #603
City-St-Zip: NAPLES, FL 34110

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MCCABE, BILL
Address: 430 COVE TOWERS DR, #1103
City-St-Zip: NAPLES, FL 34110

Title: DVP (X) Change () Addition
Name: KRUSE, EDWARD
Address: 425 COVE TOWER DR., #604
City-St-Zip: NAPLES, FL 34110

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change () Addition
Name: DEROLF, THOMAS
Address: 430 COVE TOWER DR. #701
City-St-Zip: NAPLES, FL 34110

Title: D (X) Change () Addition
Name: BASILE, MIKE
Address: 430 COVE TOWER DR., #402
City-St-Zip: NAPLES, FL 34110

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: BILL MCCABE

DP

04/17/2009

Electronic Signature of Signing Officer or Director

Date