2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Mar 09, 2004 8:00 am DOCUMENT # N98000000770 **Secretary of State** 1. Entity Name 03-09-2004 90028 036 \*\*\*\*61.25 SHELL COVE PROPERTY OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 729 SOUTH FEDERAL HWY., STE. 222 STUART FL 34994 729 SOUTH FEDERAL HWY., STE. 222 STUART FL 34994 2. Principal Place of Business Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) MOORE City & State City & State 4. FEI Number Applied For 03-0393714 Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name HOUGH, GEORGE B-JR Street Address (P.O. Box Number is Not Acceptable) 729 SOUTH FEDERAL HWY., STE. 222 STUART FL 34994 City 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 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. TITLE TITLE ☐ Change Addition Delete Paulina Reddy cealk 1459 A Captains cealk BERTIAUME, ROBERT SR 7291 SE PARADISE DR. STREET ADDRESS STREET ADDRESS Fr. Pierce, FL 34950 STUART FL 34997 CITY-ST-ZIP CITY-ST-ZIP DST Mr. Behraus Babapour 3641 Oak Clubhouse Prive #108 TITLE Delete ☐ Change \*Addition BERTIAUME, ANGIE NAME NAME 7291 SE PARADISE DR. STREET ADDRESS STREET ADDRESS Pompano Beach, FL 33069 STUART FL 34997 CITY-ST-ZIP CITY-ST-ZIP DV TITLE Delete TITLE Change Roy Ripak -HOUGH, GEORGE B JR NAME NAME 2617-NE 48-Court =.. 729 SOUTH FEDERAL HWY:, STE: 222 STREET ADDRESS STREET ADDRESS STUART FL 34994 CITY-ST-7IP CITY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete ☐ Change Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-7iP CITY-ST-ZIP TITLE ☐ Delete ☐ Addition NAMÉ STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 appears with all other like empowered.

CITY-ST-ZIP

SIGNATURE: 4

CITY-ST-7IP

SIGNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

2/25/07

FILED

772 -446-7386 Daytime Phone #