## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## Apr 13, 2005 8:00 am Secretary of State DOCUMENT # N98000004136 04-13-2005 90040 030 \*\*\*\*61.25 THE COVE HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address COCTOO C/O MIAMI MGMT. C/O MIAMI MGMT. 1145 SAWGRASS CORP. PKWY 1145 SAWGRASS CORP. PKWY SUNRISE, FL 33323 US SUNRISE, FL 33323 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 03312005 Chg-NP CR2E037 (10/03) 4. FEI Number 65-0856223 Applied For City & State City & State Not Applicable Zip Country \$8.75 Additional Zip 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name KATZMAN & KORR Street Address (P.O. Box Number is Not Acceptable) 1501 NW 49TH STREET SUITE 202 FORT LAUDERDALE, FL 33309 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 DATE (NOTE: Registered Agent signature required when reinstating) Signature, typed or printed name of registered agent and title if applicable Make check payable to 9. Election Campaign Financing \$5.00 May Be Filing Fee is \$61.25 Trust Fund Contribution. П Florida Department of State Due by May 1, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. Change Delete TITLE TITLE COKE, ASHLEY COKE, LASHLEY NAME 13926 Scypress Cove Co STREET ADDRESS 13926 SOUTH CYPRESS COVE CIRCLE STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP **DAVIE, FL. 33325** Change | ☐ Addition ☐ Delete TITLE CROUSER, HENRY NAME 13734 SOUTH GARDEN COVE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DAVIE, FL 33325** CITY-ST-ZIP Delete ☐ Change ☐ Addition TITLE GALIMIDI, TODD NAME NAME 13754 SOUTH GARDEN COVE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DAVIE, FL 33325** CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE DIAMOND, MARTY NAME 14154 N CYPRESS COVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP **DAVIE, FL 33325** CITY-ST-ZIP ☐ Change ☐ Addition TITLE SD ☐ Delete TITLE NAME DEVITO, VERONICA NAME 375 W. CYPRESS COVE CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP FORT LAUDERDALE, FL 33325 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Delete TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

**FILED** 

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 address, with all other like empowered.

HENRY CORDINSER SIGNATURE: