

2006 FOR PROFIT CORPORATION • AMENDED ANNUAL REPORT

DOCUMENT # P93000046661

1. Entity Name
LIVELY COVE, INC.



FILED

06 APR 19 PM 2:45

STATE
SECRETARY, FLORIDA

Principal Place of Business
201 COUNTY RD.
BIG PINE KEY, FL 33043 US

Mailing Address
201 COUNTY RD.
BIG PINE KEY, FL 33043 US

2. Principal Place of Business
2949 Overseas Hwy.
Suite, Apt. #, etc.

3. Mailing Address
2949 Overseas Hwy.
Suite, Apt. #, etc.

City & State
Marathon, FL

City & State
Marathon, FL

04102006 Chg-P CR2E034 (11/05)

4. FEI Number
65-0423789

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
LIVELY, ALTON J
201 COUNTY RD.
BIG PINE KEY, FL 33043

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
2949 Overseas Hwy.
City
Marathon FL Zip Code
33050

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 Alton J. Lively *Alton J. Lively* 4-13-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Amended AR is \$61.25 9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees 800072732068 04/28/06--01032--008 **61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD LIVELY, ALTON J 201 COUNTY ROAD BIG PINE KEY, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIVELY, BETTY J 201 COUNTY ROAD BIG PINE KEY, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LIVELY, DAVID J 201 COUNTY ROAD BIG PINE KEY, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STVD WOLFE, KAREN 201 COUNTY ROAD BIG PINE KEY, FL <input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2949 Overseas Hwy. Marathon, FL 33050 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2949 Overseas Hwy. Marathon, FL 33050 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 607, 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: *Alton J. Lively* 4-13-06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #