

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997.  
AMOUNT DUE ON OR BEFORE 9/17/97: \$550 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$750.)

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Aug 12 1997 8:00am  
Secretary of State

DOCUMENT # P95000054059 (7)

1. Corporation Name

BRENDAN COVE MANAGEMENT CORP.

Principal Place of Business

25151 PENNYROYAL DR.  
BONITA SPRINGS FL 33923

Mailing Address

25151 PENNYROYAL DR.  
BONITA SPRINGS FL 33923

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

07/03/1995

3a. Date of Last Report

05/01/1996

4. FEI Number

65-0596239

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐ \$5.00 May Be  
Added to Fees

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 2524 SW 45th Street

Suite, Apt. #, etc.

22

City & State

23 CAPE CORAL, FL

Zip

24 33914

Country

25 U.S.A.

2a. Mailing Address

26 2524 SW 45th Street

Suite, Apt. #, etc.

27

City & State

28 CAPE CORAL, FL

Zip

29 33914

Country

30 U.S.A.

9. Name and Address of Current Registered Agent

ROSINUS, FRANZ J  
25151 PENNYROYAL DR.  
BONITA SPRINGS FL 33923

10. Name and Address of New Registered Agent

81 Name

MICHAEL EMRICH

82 Street Address (P.O. Box Number is Not Acceptable)

2524 SW 45th Street

83

84 City

CAPE CORAL

FL

85 Zip Code

33914

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

MICHAEL EMRICH, PRESIDENT, PRES.

8/7/97

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when replacing)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME ROSINUS, FRANZ J  
STREET ADDRESS 25151 PENNYROYAL DR.  
CITY-ST-ZIP BONITA SPRINGS FL 33923

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 annual report or supplemental annual 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 12 or Block 13, changed, or on an attachment with an address.

SIGNATURE: *[Signature]* SIGNATURE REQUIRED

8/7/97 941-549-3997

CR2E034 (4/97)