

**2008 FOR PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 25, 2008 08:00 AM**  
**Secretary of State**

**DOCUMENT # P97000009864**

1. Entity Name  
COVE SOUND MOORINGS, INC.



Principal Place of Business  
12930 YACHT CLUB PLACE  
CORTEZ, FL 34215 US

Mailing Address  
12930 YACHT CLUB PLACE  
CORTEZ, FL 34215 US



01122008 No Chg-P CR2E034 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
59-3427323

Applied For  
Not Applicable

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

**6. Name and Address of Current Registered Agent**

ANDERSON, HARVEY  
12930 YACHT CLUB PL  
CORTEZ, FL 34215

**DO NOT WRITE  
IN THIS SPACE**

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 \$150.00  
After May 1, 2008 Fee will be \$550.00**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00 May Be  
Added to Fees**

**10. OFFICERS AND DIRECTORS**

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
P  
ANDERSON, HARVEY E  
12930 YACHT CLUB PLACE  
CORTEZ, FL 34215

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
VP  
BORNE, ROBERT P  
12926 YACHT CLUB PLACE  
CORTEZ, FL 34215

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP  
ST  
ADAMSON, JAMES T  
5835 LOS VERDES COURT  
BRADENTON, FL 34210

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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01/29/08-80036-001 150.00

**DO NOT WRITE  
IN THIS SPACE**

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

HARVEY E. ANDERSON

Date

Daytime Phone #

1/23/08 941-792-0700