

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 736846

Entity Name: HOMEOWNERS' ASSOCIATION OF PLUMMERS COVE, INC.

Current Principal Place of Business:

7235 BONNEVAL ROAD SUITE 400
JACKSONVILLE, FL 32256

Current Mailing Address:

7235 BONNEVAL ROAD SUITE 400
JACKSONVILLE, FL 32256 US

FEI Number: 59-3060294

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

ELITE PROPERTY MANAGEMENT
7235 BONNEVAL ROAD SUITE 400
JACKSONVILLE, FL 32256 US

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title P
Name DAWSON, ED
Address 7235 BONNEVAL ROAD SUITE 400
City-State-Zip: JACKSONVILLE FL 32256

Title TREA
Name BUSSEY, LANE
Address 7235 BONNEVAL ROAD SUITE 400
City-State-Zip: JACKSONVILLE FL 32256

Title S
Name SCHOEPPEL, PAM
Address 7235 BONNEVAL ROAD SUITE 400
City-State-Zip: JACKSONVILLE FL 32256

Title VP
Name IRAZUZTA, JOSE
Address 7235 BONNEVAL ROAD SUITE 400
City-State-Zip: JACKSONVILLE FL 32256

Title DIRECTOR
Name TOWNSEND, CALENA
Address 7235 BONNEVAL ROAD SUITE 400
City-State-Zip: JACKSONVILLE FL 32256

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: EDWARD DAWSON

PRESIDENT

03/21/2014

Electronic Signature of Signing Officer/Director Detail

Date