

2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006014

Entity Name: JULIAN COVE OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1300 RIVERPLACE BLVD. SUITE 525
JACKSONVILLE, FL 32207

Current Mailing Address:

1300 RIVERPLACE BLVD. SUITE 525
JACKSONVILLE, FL 32207 US

FEI Number: 59-3670343

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SIMON, BERT C
1300 RIVERPLACE BLVD. SUITE 525
JACKSONVILLE, FL 32207 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 DP
Name SIMON, BERT C
Address 1300 RIVERPLACE BLVD. SUITE 525
City-State-Zip: JACKSONVILLE FL 32207

Title DVPT
Name SIMON, JOYCE M
Address 1300 RIVERPLACE BLVD. SUITE 525
City-State-Zip: JACKSONVILLE FL 32207

Title DVPS
Name GRIGORYANTS, MARINA
Address 12774 JULIAN COVE LANE
City-State-Zip: JACKSONVILLE FL 32223

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: BERT C. SIMON

REGISTERED AGENT

02/03/2021

Electronic Signature of Signing Officer/Director Detail

Date