

2014 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000947

Entity Name: SOUTH COVE AT SUMMERFIELD HOMEOWNERS ASSOCIATION, INC.**FILED**
Jan 10, 2014
Secretary of State
CC1995720534**Current Principal Place of Business:**2870 SCHERER DR. N
SUITE 100
ST. PETERSBURG, FL 33716**Current Mailing Address:**2870 SCHERER DR. N
SUITE 100
ST. PETERSBURG, FL 33716**FEI Number: 20-0982442****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DICKEY, ERIC
410 S. WARE BLVD
SUITE 606
TAMPA, FL 33619 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 WOODEN, HOWARD
Address 2870 SCHERER DR. N, SUITE 100
City-State-Zip: ST. PETERSBURG FL 33716

Title TREASURER
Name GONZALEZ, ISRAEL
Address 2870 SCHERER DR. N, SUITE 100
City-State-Zip: ST. PETERSBURG FL 33716

Title VP
Name NEALLY, MICHELE
Address 2870 SCHERER DR. N, SUITE 100
City-State-Zip: ST. PETERSBURG FL 33716

Title D
Name MIDKIFF, RON
Address 2870 SCHERER DR. N, SUITE 100
City-State-Zip: ST. PETERSBURG FL 33716

Title DIRECTOR
Name TAYLOR, JAMES
Address 2870 SCHERER DR. N
SUITE 100
City-State-Zip: ST. PETERSBURG FL 33716

Title SECRETARY
Name REHBAUM, JESSICA
Address 2870 SCHERER DRIVE N
STE 100
City-State-Zip: ST PETERSBURG FL 33716

Title DIRECTOR
Name SEAYER, CHARLES
Address 2870 SCHERER DR. N
SUITE 100
City-State-Zip: ST. PETERSBURG FL 33716

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: MICHELE NEALLY**VP****01/10/2014**

Electronic Signature of Signing Officer/Director Detail

Date