

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000000947

Entity Name: SOUTH COVE AT SUMMERFIELD HOMEOWNERS ASSOCIATION, INC.**FILED**
Jan 25, 2019
Secretary of State
4433244081CC**Current Principal Place of Business:**FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR. N SUITE 100
ST. PETERSBURG, FL 33716**Current Mailing Address:**FIRSTSERVICE RESIDENTIAL
2870 SCHERER DR. N SUITE 100
ST. PETERSBURG, FL 33716 US**FEI Number: 20-0982442****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**DUARTE, ANTONIO
6221 LAND O'LAKES BLVD
LAND O'LAKES, FL 34639 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: ANTONIO DUARTE****01/25/2019**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	WILLIAMS, ROBERT
Address	2870 SCHERER DR. N SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716
Title	TREASURER
Name	SEAVER, CHARLES
Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716
Title	PRESIDENT
Name	LAUPER, FREDERICK
Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716
Title	DIRECTOR
Name	CONROV, JON
Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716

Title	DIRECTOR
Name	ROWLAND, PHILLIP
Address	2870 SCHERER DR. N SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716
Title	VP
Name	SANDERS, DANIEL
Address	FIRSTSERVICE RESIDENTIAL 2870 SCHERER DR. N SUITE 100
City-State-Zip:	ST. PETERSBURG FL 33716
Title	DIRECTOR
Name	LOPEZ JR, ALFONSO
Address	FIRSTSERVICE RESIDENTIAL 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: FREDERICK LAUPER**PRESIDENT****01/25/2019**

Electronic Signature of Signing Officer/Director Detail

Date