

**2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N04000002553

**Entity Name:** TROPICAL COVE HOMEOWNERS' ASSOCIATION, INC.

**FILED**  
**Apr 07, 2023**  
**Secretary of State**  
**6534563461CC**

**Current Principal Place of Business:**

C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
CLEARWATER, FL 33762

**Current Mailing Address:**

C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
CLEARWATER, FL 33762 US

**FEI Number:** 20-2233700

**Certificate of Status Desired:** No

**Name and Address of Current Registered Agent:**

DEBOEST, RICHARD  
2030 MCGREGOR BLVD  
FORT MYERS, FL 33901 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:** RICHARD DEBOEST

04/07/2023

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title DIRECTOR  
Name SHELBOURNE, KURT  
Address C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title DIRECTOR  
Name BRISCOE, WILLIAM  
Address C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title PRESIDENT  
Name ZELDEN, EVAN  
Address C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title TREASURER  
Name PETTINATO, RICHARD  
Address C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

Title VP  
Name KOLSUN, JOBY  
Address C/O PRECEDENT HOSPITALITY & PROPERTY MANAGEMENT  
3001 EXECUTIVE DRIVE SUITE 260  
City-State-Zip: CLEARWATER FL 33762

*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:** EVAN ZELDEN

**PRESIDENT**

04/07/2023

Electronic Signature of Signing Officer/Director Detail

Date