2025 FLORIDA NOT FOR PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Jun 04, 2025
Secretary of State
2193620920CC

DOCUMENT# N06000003612

Entity Name: CORA-WIN COVE, INC.

Current Principal Place of Business:

5400 S.E. JACK AVENUE, LOT K-6
STUART, FL 34997

Current Mailing Address:

5400 S.E. JACK AVENUE, LOT K-6
STUART, FL 34997 US

FEI Number: 20-4598860

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF
759 SW FEDERAL HWY SUITE 213
STUART, FL 34994 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: LANCE CLOUSE 06/04/2025

Electronic Signature of Registered Agent — Date

Officer/Director Detail :

Title	TREASURER
Name	O'CONNELL, SUSANA ANN
Address	5400 SE JACK AVENUE H11
City-State-Zip:	STUART FL 34997

Title	SECRETARY
Name	YATES, PATRICIA
Address	5400 SE JACK AVENUE- I1
City-State-Zip:	STUART FL 34997

Title	DIRECTOR
Name	MILLER, PATTY ANN
Address	5400 SE JACK AVENUE-L15
City-State-Zip:	STUART FL 34997

Title	PRESIDENT
Name	PARRISH, ORVILLE E JR.
Address	5400 SE JACK AVE M5
City-State-Zip:	STUART FL 34997

Title	VP
Name	SHOREY, DENNIS J
Address	5400 SE JACK AVE L11
City-State-Zip:	STUART FL 34997

Title	DIRECTOR
Name	FOX, DONNA
Address	5400 SE JACK AVE H12
City-State-Zip:	STUART FL 34997

Title	DIRECTOR
Name	THOMAS, RODNEY
Address	5400 SE JACK AVE I9
City-State-Zip:	STUART FL 34997

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: ORVILLE PARRISH PRESIDENT 06/04/2025

Electronic Signature of Signing Officer/Director Detail — Date