

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33516

FILED
Apr 13, 2023
Secretary of State
2918919675CC

Entity Name: PALM COVE ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1176 PALM COVE DR
ORLANDO, FL 32835

Current Mailing Address:

C/O LIGHTHOUSE MANAGEMENT & CONSULTING
PO BOX 0774
WINDERMERE, FL 34786-0774 US

FEI Number: 59-3225659

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

HINCKLEY, PAUL T
C/O SHUFFIELD LOWMAN
1000 LEGION PLACE SUITE 1700
ORLANDO, FL 32801 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: PAUL T HINCKLEY

04/13/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, DIRECTOR
Name BRITS, FERDI
Address 1176 PALM COVE DRIVE
City-State-Zip: ORLANDO FL 32835

Title TREASURER, DIRECTOR
Name TORRE, ANDY
Address 8431 ISLAND PALM CIRCLE
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR, VP
Name OLIVE, KELLEY
Address 1011 PALM COVE DRIVE
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name HANSON, RON
Address 8413 ISLAND PALM CIRCLE
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name RUBIN, KEN
Address 1119 PALM COVE DR
City-State-Zip: ORALNDO FL 32835

Title DIRECTOR, SECRETARY
Name KELBERMAN, LISA
Address 8479 ISLAND PALM CR
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name HEH, MARK
Address 1102 LAKE LEGRO COURT
City-State-Zip: ORLANDO FL 32835

Title DIRECTOR
Name PATTERSON, SARAH
Address 1168 PALM COVE DRIVE
City-State-Zip: ORLANDO FL 32825

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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: FERDI BRITS

PRESIDENT

04/13/2023

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title DIRECTOR
Name SAU, THERESA
Address 830 PALM COVE DRIVE
City-State-Zip: ORLANDO FL 32835