

**2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N35660

**Entity Name:** EAGLETON COVE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**11784 WEST SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065**Current Mailing Address:**11784 WEST SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 US**FEI Number:** 65-0162709**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**UNITED COMMUNITY MANAGEMENT CORP.  
11784 W. SAMPLE ROAD  
SUITE 103  
CORAL SPRINGS, FL 33065 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	D
Name	KEPPLER, WILLIAM
Address	407 EAGLETON COVE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	P
Name	HERBERT, ANDREW
Address	434 EAGLETON COVE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	VP
Name	CARLIN, ALAN
Address	510 EAGLETON COVE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	D
Name	SCHULMAN, MARTIN
Address	505 EAGLETON COVE TRACE
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	T
Name	ZIMONIS, JOSEPH
Address	427 EAGLETON COVE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	D
Name	GOLDSTEIN, ALAN
Address	430 EAGLETON COVE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	S
Name	STEIN, SHEILA
Address	422 EAGLETON COVE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

Title	D
Name	GOODMAN, EARL
Address	401 EAGLETON COVE WAY
City-State-Zip:	PALM BEACH GARDENS FL 33418

**Continues on page 2**

*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:** HERBERT ANDREW

P

04/08/2015

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date

**Officer/Director Detail Continued :**

Title	D
Name	ALLEN, RONALD
Address	526 EAGLETON COVE TRACE
City-State-Zip:	PALM BEACH GARDENS FL 33418