## 2013 FLORIDA PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P04000110290

**Entity Name: CUSTARD COVE CORPORATION** 

**Current Principal Place of Business:** 

1225 NW AVE L

BELLE GLADE. FL 33430

**Current Mailing Address:** 

1225 NW AVE L

BELLE GLADE. FL 33430

FEI Number: 59-2476529 Certificate of Status Desired: No

Name and Address of Current Registered Agent:

TRIPP, JIMMY L 5030 SE 128TH AVE OKEECHOBEE, FL 34974 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

FILED Mar 04, 2013

**Secretary of State** 

CC7061646137

Officer/Director Detail:

Title D Title [

Name PERRYMAN, BARTON T Name TRIPP, JIMMY L
Address 1190 NW 16TH STREET Address 1225 NW AVE L

City-State-Zip: BELLE GLADE FL 33430 City-State-Zip: BELLE GLADE FL 33430

Title D

Name TRIPP, H. LARUE
Address 38 AQUA RA DRIVE

City-State-Zip: JENSEN BEACH FL 34957

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 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

D

SIGNATURE: JIMMY L. TRIPP

Electronic Signature of Signing Officer/Director Detail

03/04/2013

Date