

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State

04-10-2006 90334 026 ****61.25

DOCUMENT # N99000006851

1. Entity Name
**OAK ISLAND COVE COMMUNITY OWNERS'
ASSOCIATION, INC.**



Principal Place of Business
**7836 W. IRLO BRONSON HWY.
KISSIMMEE, FL 34747**

Mailing Address
**7836 W. IRLO BRONSON HWY.
KISSIMMEE, FL 34747**

50010601



2. Principal Place of Business

3. Mailing Address

7862 W. IRLO BRONSON HWY

7862 W. IRLO BRONSON HWY

Suite, Apt. #, etc.

Suite, Apt. #, etc.

#128

#128

City & State

City & State

KISSIMMEE, FL

KISSIMMEE, FL

Zip
34747-1769

Country
USA

Zip
34747-1769

Country
USA

02012006

Chg-NP

CR2E037 (11/05)

4. FEI Number
59-3619121

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**CHEN, GEORGE
7836 W. IRLO BRONSON HWY.
KISSIMMEE, FL 34747**

7. Name and Address of New Registered Agent

Name

GARY VON BEHREN

Street Address (P.O. Box Number is Not Acceptable)

2812 BLOOMING ALAMANDA LP

City

KISSIMMEE

FL

Zip Code

34747-2252

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☒ Delete
NAME **CHEN, GEORGE**
STREET ADDRESS **7836 W. IRLO BRONSON HWY.**
CITY-ST-ZIP **KISSIMMEE, FL 34747**

TITLE **D** ☒ Delete
NAME **KERBER, MARY ELLEN**
STREET ADDRESS **7836 W. IRLO BRONSON HWY.**
CITY-ST-ZIP **KISSIMMEE, FL 34747**

TITLE **D** ☒ Delete
NAME **SALISBURY, JAMES**
STREET ADDRESS **7836 W. IRLO BRONSON HWY.**
CITY-ST-ZIP **KISSIMMEE, FL 34747**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **D** ☐ Change ☒ Addition
NAME **GARY VON BEHREN**
STREET ADDRESS **7862 W. IRLO BRONSON HWY**
CITY-ST-ZIP **KISSIMMEE, FL 34747-1769**

TITLE **D** ☐ Change ☒ Addition
NAME **ROGER HOULE**
STREET ADDRESS **7862 W. IRLO BRONSON HWY**
CITY-ST-ZIP **KISSIMMEE FL 34747-1769**

TITLE **D** ☐ Change ☒ Addition
NAME **KEVIN DOYLE**
STREET ADDRESS **7862 W. IRLO BRONSON HWY**
CITY-ST-ZIP **KISSIMMEE, FL 34747-1769**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

GARY VON BEHREN, PRES.

04/06/06

(407)390-1544

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #