


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 24, 2008 08:00 AM
Secretary of State

DOCUMENT # 720624

1. Entity Name
CORAL SEA OF SINGER ISLAND CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 605 BELVEDERE ROAD SUITE 6 WEST PALM BEACH, FL 33405	Mailing Address 605 BELVEDERE ROAD SUITE 6 WEST PALM BEACH, FL 33405
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DO NOT WRITE IN THIS SPACE



01152008 No Chg-NP CR2E037 (4/06)

4. FEI Number 59-1367894	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CLARK, DANIEL C.P.A.
 605 BELVEDERE ROAD
 SUITE 6
 WEST PALM BEACH, FL 33405

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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25
Due by May 1, 2008

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILSON, E. ANTHONY 400 LINDEN OAKS OFFICE PK ROCHESTER, NY 14625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GIACOMINI, JOHN 3930 N OCEAN DR 130 WEST PALM BEACH, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DORSCHER, ERIC 400 LINDEN OAKS OFFICE PK ROCHESTER, NY 14625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENLE, EDWARD 3930 N OCEAN DR 128 SINGER ISLAND, FL 33404
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD GRAUE, GARRETT 400 LINDEN OAKS OFFICE PARK ROCHESTER, NY 14625
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

00000794531
 01/28/08-90011-019 61.25

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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: Eric Dorschel 1-17-08
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

561-676-1350