

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 31, 2006 08:00 AM
Secretary of State

DOCUMENT # 746427 1. Entity Name THE FOUR SEASONS CONDOMINIUM ASSOCIATION OF COCOA BEACH, INC.					
Principal Place of Business 4 SEASONS CONDOMINIUM ASSOCIATION, IN 3799 S. BANANA RIVER BLVD. COCOA BEACH FL 32931 US			Mailing Address 4 SEASONS CONDOMINIUM ASSOCIATION, IN 3799 S. BANANA RIVER BLVD. COCOA BEACH FL 32931 US		
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country			3. Mailing Address Suite, Apt. #, etc. City & State Zip Country		
4. FEI Number 59-1978855				☐ Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SOILEAU, JOHN (ATTY) 1970 MICHIGAN AVE, BLDG C P O BOX 236007 COCOA FL 32923			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
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 _____					
FILE NOW: 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EDWARDS, CARLTON 3799 S BANANA RIVER BLVD 912 COCOA BEACH FL 32931	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add 1000000413125 02/10/06-80077-002 61.25	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LAPORTA, DON 3799 S BANANA RIVER BLVD #1017 COCOA BEACH FL 32931	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KNUPPELL, RON 3799 S BANANA RIVER BLVD #1014 COCOA BEACH FL 32931	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HENNIGAN, CLAUDIA 3799 S BANANA RIVER BLVD, #806 COCOA BEACH FL 32931	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SPECHA, LORRAINE 3799 S BANANA RIVER BLVD, #804 COCOA BEACH FL 32931	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Add	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

President

January 25, 2006