

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 07, 2008 8:00 am
Secretary of State

03-07-2008 90028 011 ****61.25

DOCUMENT # 762619

1. Entity Name
**COMMUNITY OFFICERS ASSOCIATION OF SINGER
ISLAND, INC.**



Principal Place of Business
**1262 SUGAR SANDS BLVD
APT 228
RIVIERA BEACH, FL 33404 US**

Mailing Address
**1262 SUGAR SANDS BLVD
APT 228
RIVIERA BEACH, FL 33404 US**

40040216



2. Principal Place of Business - No P.O. Box # **3640 NORTH OCEAN DR** 3. Mailing Address **3640 NORTH OCEAN DR**

Suite, Apt. #, etc.
1130

Suite, Apt. #, etc.
1130

02252008 Chg-NP CR2E037 (12/06)

City & State
SINGER ISLAND, FL

City & State
SINGER ISLAND, FL

4. FEI Number
65-0044011

Applied For
Not Applicable

Zip **33404** Country **USA**

Zip **33404** Country **USA**

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**RASMUSSEN, JAY
1262 SUGAR SANDS BLVD
APT 228
RIVIERA BEACH, FL 33404**

7. Name and Address of New Registered Agent

Name **SIMON, DIANE**
Street Address (P.O. Box Number is Not Acceptable)
3640 NORTH OCEAN DR, # 1130
City **SINGER ISLAND FL** Zip Code **33404**

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 *Diane Simon*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3/4/08

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

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	PD RASMUSSEN, JAY 1262 SUGAR SANDS BLVD APT 228 RIVIERA BEACH, FL 33404 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD MC CONNELL, BERNARD 2800 NORTH OCEAN DRIVE SINGER ISLAND, FL 33404 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD FEIGN, EDWARD 5460 NORTH OCEAN DR APT 33 RIVIERA BEACH, FL 33404 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MANZIANO, ELIZABETH 3400 N OCEAN DR #PH-8 RIVIERA BCH, FL 33404 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROMERO, ANDY 1030 U.S. HIGHWAY ONE, APT. 314 NORTH PALM BEACH, FL 33408 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SIMON, DIANE 3640 NORTH OCEAN DRIVE, # 1130 SINGER ISLAND, FL 33404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CROSS, DAVID 1030 SUGAR SANDS BLVD, # 368 SINGER ISLAND, FL 33404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Di MEO, DIANA GAIL 1030 POWELL DRIVE SINGER ISLAND, FL 33404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FABER, EDWARD 5380 NORTH OCEAN DRIVE, # 5C SINGER ISLAND, FL 33404 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition

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:

Diana Gail Di MEO

27 Feb 08

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #