FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

May 20 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name

SIGNATURE:

766797

(5)

CORONADO AT HIGHI AND REACH CONDOMINIUM ASSOCIATI

ON, INC.							
Principal Place of Business Mailing Address			·		- 1 108101 GODIA BINKA ANIN ŁADYA SENK INDI ALOKI DIDKI BIRLI BYDYŁ DŁAK BIRLI BYDYŁ		
3321 SO. OCEAN BLVD. HIGHLAND BEACH FL 33487 3321 SO. OCEAN BLVD. HIGHLAND BEACH FL 33487			97-2517				
					3. Date Incorporated or Qualified 3a. Date of Last Report 05/01/1996		
Principal Place of Business 2a. Mailing Address					4. FEI Number Applied I		
21 26 Suite, Apt. #, etc. Suite, Apt. #, etc.					59-2255326 Not Appl		
Suite, Apt. #	F, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired Fee Required	· · · · ·	
City & State		City & State			6. Election Campaign Financing \$5.00 May B		
23		28			Trust Fund Contribution		
Z _i p	Country Zip		Country		8. This corporation has liability for intangible tax under s. 199.0	32,	
24	25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	9. Name and Address of Curren	r Hagistered Agent	8	1 Name			
TEDESCO & LANDIS PA COMPSON FINANCIAL CENTER			8	2 Street A	t Address (P.O. Box Nur)ber is sidt Acceptable)		
980 N FEDERAL HWY			8	3			
BOCA RATON FL 33432			_	1			
	A second of the second	en e		. [35]. S	85 Zip Code		
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above harmed corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE _	Signature, typed or printed name of registered age	nt and title if applicable (NOT	E: Registered A	gent signature	re required when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1	2	
TITLE	PD DELETE		1.1 TITLE		☐ Change ☐ A	Addition	
NAME	Krakauer, Vera		1.2 NAMI				
STREET ADDRESS	3400 S OCEAN BLVD		1.3 STRE	et address			
CITY-ST-ZIP	HIGHLAND BEACH FL 33487		1.4 CITY-ST-ZIP				
TITLE	D DELETE		2.1 TITLE		Change L. A	Addition	
NAME	LIPPMAN, MARTIN		2.2 NAM	i			
STREET ADDRESS	3400 S. OCEAN BLVD. HIGHLAND BEACCH FL 33487		2.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	DT DELETE			-ST-ZIP	Change	Addition	
NAME	BERKOWER, MORTON		3.1 TITLE 3.2 NAMI			- TOURISH	
STREET ADDRESS	3420 S. OCEAN BLVD.		3.3 STREET ADDRESS				
CITY-ST-ZIP	HIGHLAND BEACH FL 33487		3.4. CITY				
TITLE			4.1 TITLE		D7 Change	Addition	
NAME	ELEFANT, PEARL 4.2		4. 2 NAM	E	EleFANT. PEARL		
STREET ADDRESS	3400 S. OCEAN BLVD.		4.3 STRE	ET ADDRESS			
CITY-ST-7IP	HIGHLAND BEACH FL 33487		4.4 CITY	ST-ZIP	HIGHIAND BEACH FL 3348	2	
TITLE	D	DELETE	5.1 TITLE			Addition	
NAME	SORRELLI, JOHN S		5.2 NAM	£			
STREET ADDRESS	3420 S. OCEAN BLVD	•	5.3 STRE	ET ADDRESS			
CITY-ST-ZIP			5.4 CITY		205 _ Change LY	Addition	
TITLE		☐ DELETE	6.1 TITLE		Chooles Caha	AUJUI(FUTI	
NAME			6.2 NAM	: FF ARBREAG	I allow & Connel Billion		
STREET ADDRESS			1		HIGHIAND BEACH FL 33	180	
CITY-ST-ZIP	y certify that the information supplies	t with this filing does not queli		-\$1-ZIP «	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the	10/	
information	n indicated on this annual report or s ficer or director of the corporation or a Block 12 or Block 13 if changed, or	upplemental annual report is t	rue and ac vered to exi dress.	curate and ecute this r	nd that my signature shall have the same legal effect as it made under oa s report as required by Chapter 617, Florida Statutes; and that my name	ith; that	