

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 26, 2004 8:00 am**  
**Secretary of State**

04-26-2004 91050 015 \*\*\*\*61.25

DOCUMENT # N01000001171



1. Entity Name  
 THE COCONUT OF SOUTH BEACH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business  
 1018 MORIDIAN AVE  
 MIAMI BEACH, FL 33139

Mailing Address  
 C/O REGATTA REAL ESTATE  
 628 6TH ST. 2ND FLR  
 MIAMI BEACH, FL 33139

14008886



2. Principal Place of Business  
 1018 Meridian Ave  
 Suite, Apt. #, etc.

3. Mailing Address  
 309 - 23rd Street  
 Suite, Apt. #, etc.  
 #3B

04212004 Chg-NP CR2E037 (10/03)

City & State  
 Miami Beach FL

City & State  
 Miami Beach FL

4. FEI Number  
 65-0943202  
 Applied For  
 Not Applicable

Zip  
 33139  
 Country  
 U.S.A.

Zip  
 33139  
 Country  
 U.S.A.

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

VODA, TIM  
 C/O REGATTA REAL ESTATE  
 628 6TH ST. 2ND FLR.  
 MIAMI, FL 33139

Name: Regatta REAL Estate Mgmt. Inc.  
 Street Address (P.O. Box Number is Not Acceptable)  
 309 - 23rd Street STE #3B  
 City: Miami Beach FL Zip Code: 33139

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

DATE  
 4/22/04

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25  
 Due by May 1, 2004

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 MERILATT, DOUGLAS 1018 MERIDIAN AVE. MIAMI, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD PERRETTA, VINCENZO 310 W 6TH ST NEW YORK, NY 10019	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DEVEREUX, EDWARD 1018 MERIDIAN AVE. MIAMI, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS VODA, TIM 628 6TH ST. MIAMI, FL 33139	<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete

TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	309 - 23rd St., #3B	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Tim Voda  
 Date: 4/22/04 Daytime Phone #: 305 673 1940