

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000008187

FILED
Mar 01, 2007
Secretary of State

Entity Name: CORAL PALMS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

2400 SW 3RD AVE.
101
MIAMI, 33 33134

New Principal Place of Business:

Current Mailing Address:

2400 SW 3RD AVE
101
MIAMI, FL 33129

New Mailing Address:

FEI Number: 02-0661103

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MISAEL, PEREZ MG
2400 SW 3RD AVE
101
MIAMI, FL 33129 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: PEREZ, MISAEL
Address: 2400 SW 3RD AVE.
City-St-Zip: MIAMI, FL 33129

Title: VPD () Delete
Name: MARILL, ALICIA C DR.
Address: 2400 SW 3RD AVE.
City-St-Zip: MIAMI, FL 33129

Title: SD () Delete
Name: PLANA, DEBORAH
Address: 2400 SW 3RD AVE.
City-St-Zip: MIAMI, FL 33129

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: MISAEL PEREZ

MG

03/01/2007

Electronic Signature of Signing Officer or Director

Date