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

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)					FILED May 04, 2006 8:00 am Secretary of State			
DOCUMENT # N0300001255 1. Entity Name					Sec	retary	y of Sta	ite
COQUINA KEY TOWNHOMES ASSOCIATION, INC.					05-0	14-2006 9020	04 050 ****61	.25
Principal Plac	e of Business	Mailing Address	•					
11902 RACE TAMPA FL 3	TRACK ROAD 33626	11902 RASE TRACK RO TAMPA FL 33626	DAD					
2. Principal P 2870	lace of Business Scherer Dr. N	3. Mailing Address				.B.C. HIN BUIL ESIN B	, 15 6 6 6 6 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7 7)
Suite, Apt.		Sterling Manager 2870 Scherer Driv	ment Servic e N., Suite	es 100	- 1st MO	ORE C	CR2E037 (10/05)
City & Stat	elersburg, FL	®t Petersburg			4. FEI Number 2	0-1417700		Applied For Not Applicable
33711	O Country USA	Zip	Country		5. Certificate of Sta		Fee Req	Additional tuired
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name O 1 1 1							,	
THE PROPERTY GROUP OF CENTRAL FLORIDA				Kon Cotten III				
11902 RACE TRACK ROAD TAMPA FL 33626				Wetherington, Hamilton, Harrison 1010 N. Florida Ave				
			City	Tan	100	<u>Ji loo c</u>	FL 3	50de 3602
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 Signature, typed or printed regard registered agent and title if appricable (NOTE: Registered Agent signature required when reinstating) DATE								
FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Added to Fees Florida Department of State								
10.	OFFICERS AND DIR	ECTORS	11.		DDITIONS/CHANG	S TO OFFICER	S AND DIRECTOR	
NAME STREET ADDRESS CITY-ST-ZIP	STD SULLIVAN, BRIAN 600 NORTH WESTSHORE BLVD SU TAMPA FL 33609-1140	☑ Delete JITE 900	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Nas	sident on McNeil 70 Scherer i	Driven, St	□ Char € 100	nge 🗖 Addition
TITLE	PD	₩ Delete	TITLE	Vict	t. Petusburg E PRESIDENT		<u>□ Char</u>	nge 🛣 Addition
NAME STREET ADDRESS CITY-ST-ZIP	CACHON, MICHAEL 600 NORTH WESTSHORE BLVD. S TAMPA FL 33609-1140	•	NAME STREET ADDRESS CITY-ST-ZIP	· —	121 RAKOWS 70 Scherer St. Petersb			ago
TITLE NAME STREET ADDRESS	VD LYONS, JOHN 600 NORTH WESTSHORE BLVD. S	Delete	TITLE NAME STREET ADDRESS	VIC	E PRESID	EMI J	☐ Char	nge 🔀 Addition
CITY-ST-ZIP	TAMPA FL 33609-1140		CITY-ST-ZIP	28	the Peterson	Dr.N.S.	96-100 33716	
TITLE NAME		Delete	TITLE NAME	TR	PASURER NAMNE R	20 OTT NE	☐ Chai	nge 🔯 Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	3970	Spinger (DY: N ≥	te:100	
TITLE NAME		☐ Delete	TITLE NAME	SEC	RETARY		☐ Char	nge Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP	25	a scherer !	7. y 5k	CIAI	
TITLE NAME		Delete	TITLE NAME	84	, Vetersou	8, PC 3	8716□ Chai	nge Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP					

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 1.19, 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: _

3/3/106.