## 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

## **DOCUMENT # N23270**

changed, or on an attachment

**SIGNATURE:** 

1. Entity Name

## CORALSTONE CONDOMINIUM ASSOCIATION, INC.



## FILED Apr 10, 2003 8:00 am Secretary of State

04-10-2003 90146 008 \*\*\*\*61.25

772)

7-6869

3-26-03

| Principal Plac   | e of Business  | Mailing Address                         |   | 1  |  |  |                    |
|--|--|---|---|--|--|--|--------------------|
| C/O ELLIOTT I  | MERRILL MGMT   | C/O ELLIOTT MERRILL MGMT                |   |  |  |  |                    |
| 1105 12TH ST   | F1 00000   | 1105 12TH ST                            |   |  |  | •  |                    |
| VERO BEACH   | FL 32960   | VERO BEACH FL 32960                     |   | I IOORIEL OIO  |  | 11 <b>3</b> 51 81811 81817 818               | 41 C1811 1881      |
| 2 Principal P  | lace of Business   | 3. Mailing Address                      | <del></del>   | anll max   |  |  |                    |
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| Suite, Apt.  |  | Suite, Apt. #, etc.                     | WOIL LA   | 7,00   | CUECK REDE IS MAKE   | NO CHANGES                                   |                    |
| 8320   |  | 835 20th P                              | ì   |  | CHECK HERE IF MAKI   | NG CHANGES                                   |                    |
| City & Stat  | e  | City & State                            | <u> </u>  | 4. FEI Number  | S5-0114268   | Ap   | oplied For         |
| Vero   | Beach FL   | Vero Bead                               | n, Rh   | `  | 00 0114E00   | No   | ot Applicable      |
| Zip  | _ Country _  | Zip                                     | Country   | 5. Certificate of  | Status Desired   | \$8.75 Add                                   | ditional           |
| <u> 3</u> 9  | 960 IN   | 32960                                   | IR  |  |  | Fee Require                                  |                    |
|  | 6. Name and Address of Current R   | legistered Agent                        |   | 7. Name and Ac   | Idress of New Registere  | d Agent                                      |                    |
|  | u jan jan ja   | erin i di di engagi se se se ga         | - Name  | heardly b  | 4000 L.  | Lm 4   |                    |
| MERRILL, KAREN L   |  |   | Styget Ad   | dress (P.O. Box Number is  | Not Acceptable)  |  |                    |
| 1105 12TH ST   |  |   | 83  | 12.90th  | PI   |  |                    |
| vero be  | ACH FL 32960   |   | l   |  |  |  |                    |
|  |  |   | City  |  | ა , <b>F</b>   | Zip Cod                                      | e                  |
|  |  |   | V   | ero Dear   |  | <b>-</b>   3a.                               | 9601               |
|  | named entity submits this statement for ions of registered agent.  | the purpose of changing its reg         | gistered office or r  | registered agent, or both, i   | n the State of Florida. I a  | m familiar with,                             | and accept         |
| trie obligat   | ions or registered agent.  | ) ^ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |   |  |  | 1.   |                    |
| · X  | KINON-C  | W DMIDI                                 |   |  | 4  | 12/23  | }                  |
| SIGNATURE .  | Signature, typed or brinted name of registered agent ar  | nd title if applicable (NOTE: Re        | egistered Agent signatur  | e required when reinstating)   | DATE   | المالي المالي                                | <del></del> - }    |
| <u>' / </u>  | Organization, typed or printed harries or registrated agents as  |   | giotalea rigani agricia   | o required microsurating,  |  |  |                    |
| /  |  | <b>A 5</b> 1 11 0                       |   |  | Malan Oha  | al Darable                                   | .                  |
|  | FILE NOW: FEE IS \$61.25   | 9. Election Campa                       |   | <b>\$5.00</b> May Be   |  | eck Payable                                  |                    |
|  | •  | Trust Fund Con                          | tribution   | Added to Food  | Elevide Den  | artmant of C                                 | 24040              |
|  | •  | Trust Fund Con                          | tribution. [  | Added to Fees  | Florida Dep  | artment of S                                 | State              |
|  |  |   |   |  |  |  |                    |
| 10.  | OFFICERS AND DIR   | ECTORS                                  | 11.   | ADDITIONS/CHAN   | GES TO OFFICERS AND  | DIRECTORS IN                                 | 10                 |
|  | OFFICERS AND DIRE  |   | 11.   | ADDITIONS/CHAN   | GES TO OFFICERS AND  |  | 10                 |
| 10.  | OFFICERS AND DIR   | ECTORS                                  | 11.   | ADDITIONS/CHAN   | GES TO OFFICERS AND  | DIRECTORS IN                                 | 10                 |
| 10.<br>TITLE<br>NAME   | OFFICERS AND DIRI<br>PD<br>NOVAS, ROBERT<br>1521 CORAL OAK LANE  | ECTORS                                  | 11. TITLE NAME  | ADDITIONS/CHAN   | GES TO OFFICERS AND  | DIRECTORS IN                                 | 10                 |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP  | OFFICERS AND DIRE PD NOVAS, ROBERT   | ECTORS Delete                           | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP   | ADDITIONS/CHAN SD Kennedh Bl 1410 Coral C Vero Beac  | GES TO OFFICERS AND  | DIRECTORS IN Change                          | 10                 |
| 10. TITLE NAME STREET ADDRESS  | OFFICERS AND DIRE PD NOVAS, ROBERT 1521 CORAL OAK LANE VERO BEACH FL 32960   | ECTORS                                  | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | ADDITIONS/CHAN SD Kenneth Bla 1410 Coral C Vero Beau   | ges to officers and ohow rack Ly Gh 3291   | DIRECTORS IN                                 | 10                 |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE  | OFFICERS AND DIRE PD NOVAS, ROBERT 1521 CORAL OAK LANE VERO BEACH FL 32960 D   | ECTORS Delete                           | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | ADDITIONS/CHAN SD Kenneth Bl 1410 Coral C Vero Beac D William Ma   | ges to officers and ohowing the same of th | DIRECTORS IN Change                          | 10                 |
| 10. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME   | OFFICERS AND DIRE PD NOVAS, ROBERT 1521 CORAL OAK LANE VERO BEACH FL 32960 D MACWILLIAM, WILLIAM   | ECTORS Delete                           | 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME  | ADDITIONS/CHAN SD Kenneth Bla 1410 Coral C Vero Beau   | ges to officers and ohowing the same of th | DIRECTORS IN Change                          | 10                 |
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12. I hereby certify that the information supplied with this filling 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 truttee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if

all other like empowered.