

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90423 040 ****61.25

DOCUMENT # N31551 1. Entity Name CORAL POINTE AT HARBOURSIDE OWNERS' ASSOCIATION, INC.					
Principal Place of Business CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR #260 CLEARWATER, FL 33762 US			Mailing Address CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR #260 CLEARWATER, FL 33762 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2953582	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CONDOMINIUM ASSOCIATES 3001 EXECUTIVE DR SUITE 260 CLEARWATER, FL 33762				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		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	TD		TITLE	VD	
NAME	BLAVNE, GERALD ☐ Delete		NAME	Piraneo, Frank ☒ Change ☐ Addition	
STREET ADDRESS	8020 SAILBOAT KEY BLVD #204		STREET ADDRESS		
CITY-ST-ZIP	SO PASADENA, FL 33707		CITY-ST-ZIP		
TITLE	VD		TITLE	VD	
NAME	PIRANCO, FRANK ☐ Delete		NAME	Piraneo, Frank ☒ Change ☐ Addition	
STREET ADDRESS	8021 SAILBOAT KEY BLVD		STREET ADDRESS		
CITY-ST-ZIP	SO. PASADENA, FL 33707		CITY-ST-ZIP		
TITLE	PD		TITLE		
NAME	FIGIEL, LEN ☐ Delete		NAME		
STREET ADDRESS	8041 SAILBOAT KEY BLVD #301		STREET ADDRESS		
CITY-ST-ZIP	SO PASADENA, FL 33707		CITY-ST-ZIP		
TITLE	SD		TITLE		
NAME	WALMSLEY, CAROL ☐ Delete		NAME		
STREET ADDRESS	7569 HORSESHOE BAY RS/D		STREET ADDRESS		
CITY-ST-ZIP	EGG HARBOR, WI 54209		CITY-ST-ZIP		
TITLE	D		TITLE	D	
NAME	SOREN, MELVIN ☐ Delete		NAME	Soren, Melvin ☒ Change ☐ Addition	
STREET ADDRESS	8021 SAILBOAT KEY BLVD		STREET ADDRESS		
CITY-ST-ZIP	SAINT PETERSBURG, FL 33707		CITY-ST-ZIP		
TITLE			TITLE		
NAME	☐ Delete		NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: <i>Leonard A. Figiel</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date				Daytime Phone #	