

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

FILED
Apr 05, 2006 8:00 am
Secretary of State

04-05-2006 90158 020 ****61.25

DOCUMENT # N41299

1. Entity Name

**TOWNHOMES OF COCOA BEACH CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

**185 ESCAMBIA LANE
COCOA BEACH FL 32931**

Mailing Address

**185 ESCAMBIA LANE
COCOA BEACH FL 32931**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-3042576

Applied For

Not Applicable

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

**VAN BUREN, AILEEN
115 ESCAMBIA LANE #407
COCOA BEACH FL 32931**

Name

Integrity Community Mgmt

Street Address (P.O. Box Number is Not Acceptable)

185 Escambia Lane

City

Cocoa Beach

FL

Zip Code

32931

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 reappointing)

DATE

3/24/06

**FILE NOW: FEE IS \$61.25
Due By May 1, 2006**

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	PD DINUCCI, JUDITH	☐ Delete
STREET ADDRESS	185 ESCAMBIA LANE #204	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE NAME	VD AVITT, JOHN	☒ Delete
STREET ADDRESS	175 ESCAMBIA LANE UNIT #701	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE NAME	TD TO, RONALD	☐ Delete
STREET ADDRESS	165 ESCAMBIA LANE UNIT #506	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE NAME	D LAVIN, PATRICK	☐ Delete
STREET ADDRESS	185 ESCAMBIA LANE #405	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE NAME	SD VAN BUREN, AILEEN	☒ Delete
STREET ADDRESS	185 ESCAMBIA LANE #407	
CITY-ST-ZIP	COCOA BEACH FL 32931	
TITLE NAME		☐ Delete
STREET ADDRESS		
CITY-ST-ZIP		

TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	VD John Marks	☐ Change ☐ Addition
STREET ADDRESS	185 Escambia Lane #603	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE NAME		☐ Change ☐ Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME	SD Susan Dunbar	☐ Change ☒ Addition
STREET ADDRESS	185 Escambia Lane #801	
CITY-ST-ZIP	Cocoa Beach, FL 32931	
TITLE NAME		☐ Change ☐ Addition
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 119, 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:

[Signature]

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #