

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 02, 2009
Secretary of State

DOCUMENT# N42890

Entity Name: COCO VILLAGE TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

3104 SHIPPING AVE
UNIT D
COCONUT GROVE, FL 33133 US

New Principal Place of Business:

Current Mailing Address:

3104 SHIPPING AVE
UNIT D
COCONUT GROVE, FL 33133 US

New Mailing Address:

FEI Number: 65-0283479 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RANADIVE, RAHUL P
3104 D SHIPPING AVE
UNIT D
MIAMI, FL 33133 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: TD () Delete
Name: RANADIVE, RAHUL
Address: 3104 SHIPPING AVE., UNIT D
City-St-Zip: COCONUT GROVE, FL 33133

Title: PD () Delete
Name: SOPKA, MARILYN
Address: 3104 SHIPPING AVE., UNIT C
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD () Delete
Name: ROWELL, JULIA
Address: 3102 B SHIPPING AVE
City-St-Zip: MIAMI, FL 33133

Title: VPD () Delete
Name: SELTZER, DAVID
Address: 10750 NW 6TH COURT
City-St-Zip: MIAMI, FL 33168

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:

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

I hereby certify that the information supplied with this filing does not qualify 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: RAHUL P. RANADIVE

TD

02/02/2009

Electronic Signature of Signing Officer or Director

_____ Date