

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000000169

FILED
Apr 16, 2008
Secretary of State

Entity Name: CORAL ISLE NEIGHBORHOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

8359 BEACON BLVD
#417
FORT MYERS, FL 33907 US

Current Mailing Address:

8359 BEACON BLVD
#417
FORT MYERS, FL 33907 US

FEI Number: 65-0508304

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

New Principal Place of Business:

11940 FAIRWAY LAKES DR.
04
FORT MYERS, FL 33913 US

New Mailing Address:

11940 FAIRWAY LAKES DR.
04
FORT MYERS, FL 33913 US

Name and Address of Current Registered Agent:

NASSOIY, SHERRY
8359 BEACON BLVD
#417
FORT MYERS, FL 33907 US

Name and Address of New Registered Agent:

NASSOIY, SHERRY
11940 FAIRWAY LAKES DR.
04
FORT MYERS, FL 33913 US

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:

04/16/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DS () Delete
Name: STOFKA, EDWARD
Address: 9248 CORAL ISLE WAY
City-St-Zip: FORT MYERS, FL 33919

Title: DP () Delete
Name: PAUX, PAULETTE
Address: 9255 CORAL ISLE WAY
City-St-Zip: FORT MYERS, FL 33919

Title: DVP () Delete
Name: SCHAUFELBERGER, RONALD
Address: 9252 CORAL ISLE WAY
City-St-Zip: FT. MYERS, FL 33919

Title: DT () Delete
Name: WILLARD-LIVELLI, LOIS
Address: 9227 CORAL ISLE WAY
City-St-Zip: FORT MYERS, FL 33919

Title: D () Delete
Name: THOMAS, KAREN
Address: 15213 CORAL ISLE CT
City-St-Zip: FORT MYERS, FL 33919

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: PAUX, PAULETTE
Address: 9255 CORAL ISLE WAY
City-St-Zip: FORT MYERS, FL 33919

Title: DVP (X) Change () Addition
Name: HERWITZ, GERALD
Address: 9237 CORAL ISLE WAY
City-St-Zip: FORT MYERS, FL 33919

Title: DT (X) Change () Addition
Name: LIVELLI, LOIS
Address: 9227 CORAL ISLE WAY
City-St-Zip: FT. MYERS, FL 33919

Title: DS (X) Change () Addition
Name: STOFKA, EDWARD
Address: 9248 CORAL ISLE WAY
City-St-Zip: FORT MYERS, FL 33919

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: SHERRY K NASSOIY

RA

04/16/2008

Electronic Signature of Signing Officer or Director

Date