

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000000145

FILED
Apr 13, 2007
Secretary of State

Entity Name: COZUMEL CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

960 CAPE MARCO DRIVE
MARCO ISLAND, FL 34145

New Principal Place of Business:

Current Mailing Address:

960 CAPE MARCO DRIVE
MARCO ISLAND, FL 34145

New Mailing Address:

FEI Number: 59-3487508 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NAPLES-LAWDOCK, INC.
1395 PANTHER LANE
SUITE 300
NAPLES, FL 34109 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: D () Delete
Name: DEBAUGE, LARRY
Address: 960 CAPE MARCO DRIVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: P () Delete
Name: WICK, MIKE
Address: 960 CAPE MARCO DRIVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: S () Delete
Name: GOUDIE, ALEX
Address: 960 CAPE MARCO DR
City-St-Zip: MARCO ISLAND, FL 34145

Title: T () Delete
Name: CLEARY, GERALD
Address: 960 CAPE MARCO DRIVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: D () Delete
Name: REILLY, JACK
Address: 960 CAPE MARCO DR.
City-St-Zip: MARCO ISLAND, FL 34145

Title: D () Delete
Name: BARAKAT, SAFWAN
Address: 960 CAPE MARCO DR.
City-St-Zip: MARCO ISLAND, FL 34145

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: WICK, MIKE
Address: 960 CAPE MARCO DRIVE
City-St-Zip: MARCO ISLAND, FL 34145

Title: S (X) Change () Addition
Name: TONY, SCIORTINO
Address: 960 CAPE MARCO DR
City-St-Zip: MARCO ISLAND, FL 34145

Title: P (X) Change () Addition
Name: CLEARY, JERRY
Address: 960 CAPE MARCO DRIVE
City-St-Zip: MARCO ISLAND, FL 34145

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 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: JERRY CLEARY

P

04/13/2007

Electronic Signature of Signing Officer or Director

Date