## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N20076

FILED Apr 03, 2009 Secretary of State

Entity Name: CORAL RIDGE ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:				New Princ	New Principal Place of Business:			
1700 NE 52	EY BRENNEMA ND ST DERDALE, FL		US					
Current Mailing Address:				New Mailir	New Mailing Address:			
P. O. BOX 7 FT. LAUDE	70403 RDALE, FL 333	307 U	S					
FEI Number: (	65-0002387	FEI Numb	per Applied For ( )	FEI Number Not Appli	cable ( )	Certificate of Status Desire	ed ( )	
Name and Address of Current Registered Agent: Name and Address of New Registered Agent:								
BEAMER, WILLIAM D 1975 E. SUNRISE BLVD. FORT LAUDERDALE, FL 33304 US								
The above r in the State	named entity su of Florida.	bmits thi	s statement for the pu	rpose of changing it	s registered o	office or registered agent	, or both,	
SIGNATUR	E:							
	Electronic	Signatu	re of Registered Agen	t		Date		
OFFICERS AND DIRECTORS:				ADDITION	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	RS () D MURPHY, LORET 1460 NE 56TH ST FT. LAUDERDALE	TA REET	34	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition		
Title: Name: Address: City-St-Zip:	DV () D HANDLEY, JACK 1600 NE 56 ST. # FT LAUDERDALE		4	Title: Name: Address: City-St-Zip:	( )	) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	CS () D MURPHY, KATHL 1466 NE 56TH ST FT. LAUDERDALE	REET	34	Title: Name: Address: City-St-Zip:	( )	) Change()Addition		
Title: Name: Address: City-St-Zip:	D () D VENNE, BILL 1469 NE 53RD ST FT. LAUDERDALE	TREET	34	Title: Name: Address: City-St-Zip:	( )	) Change ()Addition		
Title: Name: Address: City-St-Zip:	PD () D BRENNEMAN, BU 1700 N.E. 52ND S FT LAUDERDALE	ST	4	Title: Name: Address: City-St-Zip:	( )	) Change ( ) Addition		
Title: Name: Address: City-St-Zip:	T () D BAILLE, CAROL 1500 NE 51ST ST FT. LAUDERDALE		34	Title: Name: Address: City-St-Zip:	T (X BAILLIE, CARC 1500 NE 51ST FT. LAUDERDA	STREET		

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: CAROL BAILLIE T 04/03/2009