

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 764085

FILED  
Mar 08, 2011  
Secretary of State

**Entity Name:** 330 COCOANUT ROW CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

330 COCOANUT ROW  
PALM BCH, FL 33480

**New Principal Place of Business:**

**Current Mailing Address:**

330 COCOANUT ROW  
PALM BCH, FL 33480

**New Mailing Address:**

**FEI Number:** 59-2248625

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROBINSON, CARALYN P  
330 COCOANUT ROW  
PALM BEACH, FL 33480 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: PD  
Name: COWEN, EDNA  
Address: 330 COCOANUT ROW  
City-St-Zip: PALM BEACH, FL 33480

Title: VD  
Name: RAND, LISA  
Address: 330 COCOANUT ROW  
City-St-Zip: PALM BEACH, FL 33480

Title: T  
Name: AVERY, JOHN  
Address: 330 COCOANUT ROW  
City-St-Zip: PALM BEACH, FL 33480

Title: S  
Name: STETSON, JULIA  
Address: 330 COCOANUT ROW  
City-St-Zip: PALM BEACH, FL 33480

Title: D  
Name: KELLY, ANNE  
Address: 330 COCOANUT ROW  
City-St-Zip: PALM BEACH, FL 33480

Title: AS  
Name: ROBINSON, CARALYN P  
Address: 330 COCONUT ROW  
City-St-Zip: PALM BEACH, FL 33480

I hereby 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 all other like empowered.

SIGNATURE: CARALYN P. ROBINSON

AS

03/08/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date