

2015 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742647

Entity Name: COCO PALMS CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O HAMILTON
700 W VENICE AVE 105
VENICE, FL 34285**Current Mailing Address:**C/O HAMILTON
700 W VENICE AVE 105
VENICE, FL 34285 US**FEI Number:** 59-2403246**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SCKOWSKA, JO-ANNE
530 US HWY 41 BYPASS S.
#18B
VENICE, FL 34285 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:** JO-ANNE SCKOWSKA**03/25/2015**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SCKOWSKA, JO-ANNE
Address C/O HAMILTON
 700 W VENICE AVE 105
City-State-Zip: VENICE FL 34285

Title SECRETARY
Name FERRAIOLI, RAFFAELE
Address C/O HAMILTON
 700 W VENICE AVE #105
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name RONDA, HAYES
Address C/O HAMILTON
 700 W VENICE AVE 105
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name SCHAB, TERESA
Address C/O HAMILTON
 700 W VENICE AVE 105
City-State-Zip: VENICE FL 34285

Title TREASURER
Name HAMILTON, PATRICIA M
Address 700 W VENICE AVE
 105
City-State-Zip: VENICE FL 34285

Title DIRECTOR
Name STEINEMAN, TIM
Address C/O HAMILTON
 700 W VENICE AVE 105
City-State-Zip: VENICE FL 34285

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: PATRICIA M. HAMILTON**TREASURER****03/25/2015**

Electronic Signature of Signing Officer/Director Detail

Date