

**2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# 751203

**Entity Name:** CORAL GARDENS II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

6635 W COMMERCIAL BLVD STE 200  
TAMARAC, FL 33319

**Current Mailing Address:**

6635 W COMMERCIAL BLVD STE 200  
TAMARAC, FL 33319

**FEI Number:** 59-2096569

**Certificate of Status Desired:** No

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

JENNINGS & VALANCY, P.A.  
311 SE 13 ST  
FT LAUDERDALE, FL 33316 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:**

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name            SHIVES, CONNIE  
Address        6635 W COMMERCIAL BLVD  
                  200  
City-State-Zip: TAMARAC FL 33319

Title            SECRETARY  
Name            MARACALLO, ISABEL  
Address        6635 W COMMERCIAL BLVD  
                  200  
City-State-Zip: TAMARAC FL 33319

Title            DIRECTOR  
Name            AMADOR, NANCY  
Address        6635 W COMMERCIAL BLVD  
                  200  
City-State-Zip: TAMARAC FL 33319

Title            DIRECTOR  
Name            PRICE, ALICE  
Address        6635 W COMMERCIAL BLVD  
                  200  
City-State-Zip: TAMARAC FL 33319

*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: CONNIE SHIVES**

**PRESIDENT**

**06/15/2020**

\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail

\_\_\_\_\_  
Date