

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000005069

FILED
Mar 23, 2020
Secretary of State
5897185783CC

Entity Name: COCO CAY CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O DAVENPORT PROPERTY MGMT
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467

Current Mailing Address:

C/O DAVENPORT PROPERTY MGMT
6620 LAKE WORTH RD. SUITE F
LAKE WORTH, FL 33467 US

FEI Number: 20-2897962

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

SACHS SAX CAPLAN
6111 BROKEN SOUND PKWY, NW
SUITE 200
BOCA RATON, FL 33487 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: SACHS

03/23/2020

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT, TREASURER
Name MICELI, KATHLEEN
Address C/O DAVENPORT PROPERTY MGMT
 6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title SECRETARY, VP
Name O'BRIEN, JAMES
Address C/O DAVENPORT PROPERTY MGMT
 6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name RYAN, DIANA
Address C/O DAVENPORT PROPERTY MGMT
 6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name GILL, EDUARDO
Address C/O DAVENPORT PROPERTY MGMT
 6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name BARE, SABRINA
Address C/O DAVENPORT PROPERTY MGMT
 6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name RUSSO-PECONIS, CHRISTINA
Address C/O DAVENPORT PROPERTY MGMT
 6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

Title DIRECTOR
Name SONNER, SUZANNE
Address C/O DAVENPORT PROPERTY MGMT
 6620 LAKE WORTH RD. SUITE F
City-State-Zip: LAKE WORTH FL 33467

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: KATHLEEN MICELI

PRESIDENT

03/23/2020

Electronic Signature of Signing Officer/Director Detail

Date