

**2016 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N96000001582

**Entity Name:** CORAL REEF CONDOMINIUM ASSOCIATION OF INDIALANTIC, INC.**FILED**  
**Apr 19, 2016**  
**Secretary of State**  
**CC1029738057****Current Principal Place of Business:**928 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901**Current Mailing Address:**928 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901 US**FEI Number: 59-3101672****Certificate of Status Desired: No****Name and Address of Current Registered Agent:**SPACE COAST PROPERTY MANAGEMENT OF BREVARD  
928 E. NEW HAVEN AVE.  
MELBOURNE, FL 32901 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 TREA  
Name SULLIVAN, LAURIE  
Address 928 E. NEW HAVEN AVE.  
City-State-Zip: MELBOURNE FL 32901Title PRESIDENT  
Name SAYLES, LORETTA  
Address 928 E. NEW HAVEN AVE.  
City-State-Zip: MELBOURNE FL 32901Title DAL  
Name DUNSFORD, CHARLES  
Address 928 E. NEW HAVEN AVE.  
City-State-Zip: MELBOURNE FL 32901Title SECRETARY  
Name WEBER, BILL  
Address 928 E. NEW HAVEN AVE.  
City-State-Zip: MELBOURNE FL 32901Title VP  
Name DELAUDER, DICK  
Address 928 E. NEW HAVEN AVE.  
City-State-Zip: MELBOURNE FL 32901

*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: LAURIE SULLIVAN****TREASURER****04/19/2016**\_\_\_\_\_  
Electronic Signature of Signing Officer/Director Detail\_\_\_\_\_  
Date