

**2021 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N98000004095

**Entity Name:** COCO POINTE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**SUPERIOR ASSOCIATION MANAGEMENT  
20283 STATE ROAD 7 219  
BOCA RATON , FL 33498**Current Mailing Address:**SUPERIOR ASSOCIATION MANAGEMENT  
20283 STATE ROAD 7 219  
BOCA RATON , FL 33498 US**FEI Number:** 65-0939662**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SHIR LAW GROUP  
SUPERIOR ASSOCIATION MANAGEMENT  
2295 N.W. CORPORATE BLVD. SUITE 140  
BOCA RATON , FL 33431 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:** GUY SHIR

04/26/2021

Electronic Signature of Registered Agent

Date

**Officer/Director Detail :**

Title            PRESIDENT  
Name           BURRAGE, PAUL  
Address        SUPERIOR ASSOCIATION  
                  MANAGEMENT  
                  20283 STATE ROAD 7 219  
City-State-Zip: BOCA RATON FL 33498

Title            SECRETARY  
Name           SKELTON, CATHY  
Address        SUPERIOR ASSOCIATION  
                  MANAGEMENT  
                  20283 STATE ROAD 7 219  
City-State-Zip: BOCA RATON FL 33498

Title            TREASURER  
Name           MASLANKA, CHRISTOPHER  
Address        SUPERIOR ASSOCIATION  
                  MANAGEMENT  
                  20283 STATE ROAD 7 219  
City-State-Zip: BOCA RATON FL 33498

Title            SECRETARY  
Name           HEFLIN, MICHAEL  
Address        SUPERIOR ASSOCIATION  
                  MANAGEMENT  
                  20283 STATE ROAD 7 219  
City-State-Zip: BOCA RATON FL 33498

Title            DIRECTOR  
Name           CASTILLO, JUAN  
Address        SUPERIOR ASSOCIATION  
                  MANAGEMENT  
                  20283 STATE ROAD 7 219  
City-State-Zip: BOCA RATON FL 33498

*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:** PAUL BURRAGE

PRESIDENT

04/26/2021

Electronic Signature of Signing Officer/Director Detail

Date