2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE:

May 06, 2005 8:00 am **DOCUMENT # 708618** Secretary of State 1. Entity Name 05-06-2005 90108 034 ****61.25 1500 CORAL TOWERS CONDOMINIUM, INC. Principal Place of Business Mailing Address 1500 N. E. 127TH STREET NORTH MIAMI FL 33161 1500 N. E. 127TH STREET NORTH MIAMI FL 33161 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) Applied For City & State City & State 4. FEI Number 59-1118683 Not Applicable Zip Zip Country \$8.75 Additional Country 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GARDNER, MARY Street Address (P.O. Box Number is Not Acceptable) **1500 NE 127TH STREET** 106 N MIAMI FL 33161 Zip Code 8. 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. I am familiar with, and accept the obligations of registered agent. 2005 SIGNATURE (NOTE Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. residenti FITLE ☐ Delete TITLE ☐ Change ☐ Addition Mary Gardiner #106 GARDNER, MARY NAME NAME 1500 NE 127TH ST STREET ADDRESS STREET ADDRESS N. Hiami, FL 37161 N MIAMI FL CITY-ST-ZIP CITY-ST-ZIP V- President Addition TITLE Delete TITLE Change Pat McVeign St#301 ROSS, CHARLES W NAME NAME 1500 NE 127TH/ST APT 314 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33161 FL 33161 Hiami CITY-ST-ZIP CITY-ST-ZIP SD ☐ Delete TITLE Change ☐ Addition TITLE reeman FREEMAN, MARY NAME NAME Manu 1500 NE 127TH ST APT 303 STREET ADDRESS STREET ADDRESS NORTH MIAMI FL 33161 CITY - ST - ZIP CITY-ST-ZIP ecretar 다 Change ☐ Addition TITLE ☐ Delete TITLE atricia Nolton NOLTON, PATRICIA NAME 500NE 127 XS+#307 1500 NE 127 STREET #307 STREET ADDRESS STREET ADDRESS FL 33161 MIAMI FL 33161 CITY-ST-ZIP CITY-ST-ZIP Change Addition TITLE TITLE □ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Defete TITLE Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CHTY-ST-7IP CITY-ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

G OFFICER OR DIRECTOR

FILED

Daytime Phone #