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Mar 03 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 711341 (8)

1. Corporation Name

CORONET ISLE CONDOMINIUM, INC.

Principal Place of Business

Mailing Address

2215 JACKSON ST.
APT 3
HOLLYWOOD FL 33020
US

2215 JACKSON ST.
APT 3
HOLLYWOOD FL 33020

3. Date Incorporated or Qualified

08/15/1966

4. FEI Number

59-1231870

☒ Applied For
☐ Not Applicable

2. Principal Place of Business

2a. Mailing Address

21. *Joan Kicera*

26. *Joan Kicera*

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22. *2215 Jackson St Apt 7*

27. *2215 Jackson St Apt 7*

City & State

City & State

23. *Hollywood Fl Brevard*

28. *Hollywood Fl*

Zip

Zip

24. *33020*

29. *33020*

Country

Country

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~DE ANDREA, STELLA~~
~~2215 JACKSON ST., #3~~
~~HOLLYWOOD FL 33020~~

Kicera
Kicera - Joan
2215 Jackson St Apt 7
Hollywood Fl 33020

81. Name *Joan Kicera*
82. Street Address (P.O. Box Number Is Not Acceptable) *2215 Jackson St Apt 7*
83. *Hollywood Fl 33020*
84. City *FL*

85. Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *Joan Kicera*

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME *P*
STREET ADDRESS *MCMAHON, ALYCE*
CITY-ST-ZIP *2215 JACKSON ST, #5*
HOLLYWOOD, FL 00000

1.1 TITLE *Pres - Dr. Rame* ☐ Change ☐ Addition
1.2 NAME *McMahon alyce*
1.3 STREET ADDRESS *2215 Jackson St Apt 5*
1.4 CITY-ST-ZIP *Hollywood - Fl - 33020*

TITLE ☐ DELETE
NAME *TO Director*
STREET ADDRESS *DEANDREA, STELLA*
CITY-ST-ZIP *2215 JACKSON ST., SUITE 3*
HOLLYWOOD, FL 00000

2.1 TITLE *Vice Pres - Dr. Rame* ☐ Change ☐ Addition
2.2 NAME *Robert McMahon*
2.3 STREET ADDRESS *2215 Jackson St Apt 2*
2.4 CITY-ST-ZIP *Hollywood - Fl - 33020*

TITLE ☐ DELETE
NAME *D*
STREET ADDRESS *ELSIE OLIVERS*
CITY-ST-ZIP *2215 JACKSON ST APT 3*
HOLLYWOOD, FL 00000

3.1 TITLE *Sec - Treas - Dir -* ☐ Change ☐ Addition
3.2 NAME *Joan Kicera*
3.3 STREET ADDRESS *2215 Jackson St Apt 7*
3.4 CITY-ST-ZIP *Hollywood - Fl - 33020*

TITLE ☐ DELETE
NAME *TSO*
STREET ADDRESS *BOLANS, LINDA*
CITY-ST-ZIP *2215 JACKSON ST., SUITE 11*
HOLLYWOOD, FL 00000

4.1 TITLE *Dir. Quellet* ☐ Change ☐ Addition
4.2 NAME *Lucin Quellet*
4.3 STREET ADDRESS *2215 Jackson St Apt 9*
4.4 CITY-ST-ZIP *Hollywood - Fl - 33020*

TITLE ☐ DELETE
NAME *VD*
STREET ADDRESS *MCMAHON, ROBERT*
CITY-ST-ZIP *2215 JACKSON ST., SUITE 2*
HOLLYWOOD, FL 00000

5.1 TITLE *Dir - John Sallato* ☐ Change ☐ Addition
5.2 NAME *2215 Jackson St Apt 11*
5.3 STREET ADDRESS *Hollywood Fl - 33020*
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME *D*
STREET ADDRESS *PROVIN, FLORANCE*
CITY-ST-ZIP *2215 JACKSON ST, SUITE 4*
HOLLYWOOD FL

6.1 TITLE *Dir - Stella De Andrea* ☐ Change ☐ Addition
6.2 NAME *2215 Jackson St Apt 3*
6.3 STREET ADDRESS *Hollywood - Fl - 33020*
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Joan Kicera

2/23/98 *954*
920-7617

CR2E037 (10/97)