

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 14, 2006 8:00 am
Secretary of State

06-14-2006 90004 021 ****61.25

DOCUMENT # 719819

1. Entity Name
CORONADO DEL MAR OWNERS, INC.



Principal Place of Business
**701 S ATLANTIC AV.
SUITE 8
NEW SMYRNA BEACH, FL 32169 US**

Mailing Address
**701 SOUTH ATLANTIC AVE APT 8
NEW SMYRNA BEACH, FL 32169**



2. Principal Place of Business

3. Mailing Address

06122006 Chg-NP CR2E037 (4/06)

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number
59-1452087

Applied For
Not Applicable

Zip Country

Zip Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**FROST, CYNTHIA A
701 S. ATLANTIC AVENUE
STE 8
NEW SMYRNA BCH, FL 32169**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by September 6, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **SHIELDS, MARILYN**
STREET ADDRESS **39713 MUIRFIELD LANE**
CITY-ST-ZIP **NORTHVILLE, MI 48167**

TITLE **D** ☐ Delete
NAME **RAABE, DAN**
STREET ADDRESS **760 S TROY AVENUE**
CITY-ST-ZIP **CINCINNATI, OH 45246**

TITLE **D** ☐ Delete
NAME **BEHNER, RONALD L.**
STREET ADDRESS **454 VICTOR AVE**
CITY-ST-ZIP **LONGWOOD, FL 32750**

TITLE **DP** ☐ Delete
NAME **FELTY, ORVILLE**
STREET ADDRESS **1090 TIMBERLAND DR. SE**
CITY-ST-ZIP **MARIETTA, GA 30067**

TITLE **DS** ☐ Delete
NAME **DALRYMPLE, GEORGE**
STREET ADDRESS **960 MATHER ST**
CITY-ST-ZIP **SUFFIELD, CT 06078**

TITLE **DT** ☐ Delete
NAME **MILLER, ROBERT**
STREET ADDRESS **2151 W DRY CREEK RD**
CITY-ST-ZIP **LITTLETON, CO 80120**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME ☐ Change ☐ Addition

STREET ADDRESS ☒ Change ☐ Addition

CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition

NAME ☒ Change ☐ Addition

STREET ADDRESS ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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.

SIGNATURE *Cynthia A. Frost* **CYNTHIA A. FROST** 6/12/06 386-428-2970