


**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 12, 2005 08:00 AM
Secretary of State

DOCUMENT # 724529
1. Entity Name
CORAL ISLE WEST YACHT ASSOCIATION, INC.



Principal Place of Business Mailing Address
**3545 N. E. 166TH STREET
NORTH MIAMI BEACH, FL 33160** **3464 NE 167TH STREET
NORTH MIAMI BEACH, FL 33160**

DO NOT WRITE IN THIS SPACE



02282005 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-1423021 Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent
**PIERGROSSI, MAURICE
3464 NE 167TH STREET
NORTH MIAMI BEACH, FL 33160**

**DO NOT WRITE
IN THIS SPACE**

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:  **MAURICE PIERGROSSI** **3/10/05**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$64.25
Due by May 1, 2005** 9. Election Campaign Financing
Trust Fund Contribution. **\$5.00** May Be
Added to Fees

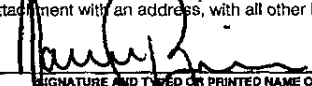
10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PIERGROSSI, MAURICE
STREET ADDRESS	3464 NE 167TH STREET
CITY - ST - ZIP	NORTH MIAMI BEACH, FL 33160
TITLE	S
NAME	LITVINOV, PAVEL
STREET ADDRESS	3709 NE 166 STREET
CITY - ST - ZIP	N MIAMI BEACH, FL 33160
TITLE	T
NAME	PIERGROSSI, MAURICE
STREET ADDRESS	3464 NE 167TH STREET
CITY - ST - ZIP	NORTH MIAMI BEACH, FL 33160
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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03/14/05-80003-011 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:  **MAURICE PIERGROSSI** **3/10/05** **305-785-8802**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #