# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**
**Apr 08, 2005 8:00 am**
**Secretary of State**
04-08-2005 90073 008 ****61.25

DOCUMENT # 724946

1. Entity Name
CORONADO CONDOMINIUM ASSOC INC

| Principal Place of Business | Mailing Address |
|---|---|
| 20301 W. COUNTRY CLUB DRIVE<br>NORTH MIAMI BEACH, FL 33180 | 20301 W. COUNTRY CLUB DRIVE<br>NORTH MIAMI BEACH, FL 33180 |

04042005 Chg-NP CR2E037 (10/03)

| 2. Principal Place of Business | 3. Mailing Address |
|---|---|
| Suite, Apt. #, etc. | Suite, Apt. #, etc. |
| City & State | City & State |
| Zip / Country | Zip / Country |

4. FEI Number 13-2753710 ☐ Applied For ☐ Not Applicable

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 |
|---|---|
| FELDMAN, MICHAEL K ESQ<br>1111 KANE CONCOURSE, STE. 200<br>BAY HARBOR ISLANDS, FL 33154-2025 | Name<br>Street Address (P.O. Box Number is Not Acceptable)<br>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 _____ DATE
- Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is $61.25**
**Due by May 1, 2005**

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 | | | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 | | |
|---|---|---|---|---|---|
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PD<br>HAWKINS-GREENIDGE, JESSICA<br>20301 W COUNTRY CLUB DR<br>AVENTURA, FL 33180 | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | PRESIDENT<br>GORDON, ROBERT<br>20301 W COUNTRY CLUB DR<br>AVENTURA FL 33180 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SD<br>GORDON, MILTON<br>20301 W COUNTRY CLUB DR<br>NO MIAMI BCH, FL 00000, | ☒ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | SECTRY/DIRECTOR<br>FRANK, MAY<br>20301 W COUNTRY CLUB DR<br>AVENTURA, FL. 33180 | ☐ Change ☒ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | T<br>SHAPIRO, MILTON<br>20301 W COUNTRY CLUB DR<br>AVENTURA, FL 33180 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | TREASURER/DIRECTOR | ☒ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | VD<br>BOHEN, MORRIS<br>20301 W COUNTRY CLUB DR<br>NO MIAMI BCH, FL 00000, | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>SARETSKY, ARTHUR<br>20301 W COUNTRY CLUB DR<br>AVENTURA, FL 33180 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |
| TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | D<br>GROSSHANDLER, MURRAY<br>20301 W COUNTRY CLUB DR<br>AVENTURA, FL 33180 | ☐ Delete | TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP | | ☐ Change ☐ Addition |

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.

**SIGNATURE:** Milton Shapiro Treas 4/5/05 (305)931-5900
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #