


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90010 005 ****61.25

DOCUMENT # 733950 1. Entity Name SCHLITT-CORONADA HOME OWNERS ASSOCIATION, INC.	
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Principal Place of Business 5300 NORTH A1A VERO BEACH, FL 32963 US	Mailing Address 1516 7TH ST VERO BEACH, FL 32962 US
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip Country	Zip Country



02122006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1631718	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PURCELL, MARTHA 5300 NORTH A1A, #208 VERO BEACH, FL 32963	
7. Name and Address of New Registered Agent Name Karen O'Connor <i>Karen O'Connor 2-20-06</i> Street Address (P.O. Box Number is Not Acceptable) 5300 N. A1A, #306 Vero Beach, FL 32963 City Vero Beach FL Zip Code 32963	

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 Karen O'Connor
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 May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD O'CONNER, KAREN 5300 NORTH A1A #306 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD O' Connor, Karen <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 5300 North A1A, #306 Vero Beach, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PURCELL, MARTHA 5300 NORTH A1A, #208 VERO BEACH, FL 32963 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Griesinger, Theodore <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 915 Sea Watch Lane Vero Beach, FL 32963
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MAYREND, GEORGE R 5300 N. A1A, #407 VERO BEACH, FL 32963 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: Karen O'Connor **Karen O'Connor** **2-20-06 (772) 231-9863**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #