## 2002 UNIFORM BUSINESS REPORT (UBR) DOCUMENT # 742088 1. Entity Name COCOPLUM CIVIC ASSOCIATION, INC.

## **FILED** Jul 28, 2002 8:00 am Secretary of State 07-28-2002 90174 030 \*\*\*\*61.25

| Principal Pla  | ace of Business   | Mailir                       | ng Address   |  |   | 1   |                                      |  |                                     |
|--|---|------------------------------|--|--|---|---|--------------------------------------|--|-------------------------------------|
| 7601 LOS PINOS BLVD<br>TENNIS COURTS<br>CORAL GABLES FL 33143<br>US  |   | 7420 I                       | % LEWIS CARROLL<br>7420 MONACO STREET<br>CORAL GABLES FL 33143<br>US   |  |   |   | (B )(B)( \$0)(B) 10(B) (A()          | <b>   </b>                               | <b>81811 818</b> 17 1883            |
| 2. Principal   | Place of Business   | 3. Ma                        | iling Address  |  |   |   |                                      |  |                                     |
| Suite, Apt. #, etc.  |   | Su                           | Suite, Apt. #, etc.  |  |   | DO NOT WRITE IN THIS SPACE  |                                      |  |                                     |
| City of Cha  |   |                              |  |  |   |   |                                      |  |                                     |
| City & State   |   | Cr                           | City & State   |  |   | 4. FEI Number 59  | -2522183                             | <del></del>                              | Applied For<br>Not Applicable       |
| Zip<br>.•  | Country   | Zip                          | р  | Country  |   | 5. Certificate of Sta   | tus Desired                          | ¢9.75                                    | Additional                          |
|  | 6. Name and Address of  | Current Registere            | Registered Agent   |  | 7. Name and Address of New Registered Agent |   |                                      |  |                                     |
|  | · <del></del>   |                              |  | Name   | e   |   |                                      |  |                                     |
| 7420 MO  |   | يرسد المحد                   | in a second of the second of t |  | t Address (                                 | (P.O. Box Number is N   | ot Acceptable)                       | ر بيعم د من                              |                                     |
| OUNAL G  | ADCES PE 33 143   |                              |  | City   | .,,   |   |                                      | FL Zip C                                 | ode                                 |
| 8. The above   | e named entity submits this state ations of registered agent.   | ement for the purp           | ose of changing its  | registered office  | or register                                 | red agent, or both, in the  | ne State of Florida                  |  | th and socs-t                       |
| SIGNATURE  | Signature, typed or printed name of registe   | tered agent and title if app | blicable. (NOTE  | E: Registered Agent sig  | nature required                             | d when reinstating)   | (                                    | DATE                                     |                                     |
| SIGNATURE  | After September 13, 200   | 1                            |  | mpaign Financing   |   | \$5.00 May Be   | Make C                               | heck Payabl                              |                                     |
|  | After September 13, 200 min. will be \$236.25.  | )2,                          | 9. Election Can<br>Trust Fund C  | npaign Financing<br>Contribution.  | 9 🗆   | \$5.00 May Be<br>Added to Fees  | Make C<br>Depar                      | heck Payabl                              | ite                                 |
| 10.  | After September 13, 200 min. will be \$236.25.  | 1                            | 9. Election Can<br>Trust Fund C  | mpaign Financing<br>Contribution,  |   | \$5.00 May Be<br>Added to Fees  | Make C<br>Depar                      | theck Payabl<br>rtment of Sta            | IN 10                               |
| 10.<br>îrtê  | After September 13, 200 min. will be \$236.25.  OFFICERS  | )2,                          | 9. Election Can<br>Trust Fund C  | mpaign Financing<br>Contribution.  |   | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EQSUYE P               | Make C<br>Depai<br>S TO OFFICERS AN  | theck Payabletment of Sta                | IN 10                               |
| 10.<br>TILÉ  | After September 13, 200 min. will be \$236.25.  OFFICERS A D BLAKE, JOHN  | )2,                          | 9. Election Can<br>Trust Fund C  | mpaign Financing<br>Contribution.  11.  TITLE  NAME  | Tr.   | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EASURE MILITORY        | Make C<br>Depai<br>S TO OFFICERS AN  | theck Payabletment of Sta                | IN 10                               |
| 10.<br>îrtê  | After September 13, 200 min. will be \$236.25.  OFFICERS / D BLAKE, JOHN 7801 LOS PINOS BLVD.   | AND DIRECTORS                | 9. Election Can<br>Trust Fund C  | mpaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS   | Tra Am                                      | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EASURE IT<br>TO HOMACO | Make C<br>Depail<br>S TO OFFICERS AN | theck Payable rtment of Standard Change  | IN 10                               |
| 10.<br>Itlé<br>Iame<br>Street address<br>Ity-St-Zip  | After September 13, 200 min. will be \$236.25.  OFFICERS A D BLAKE, JOHN  | AND DIRECTORS                | 9. Election Can<br>Trust Fund C  | npaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP   | Tra Am                                      | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EASURE MILITORY        | Make C<br>Depail<br>S TO OFFICERS AN | theck Payable triment of Standard Change | ite IN 10  Addition                 |
| 10.<br>Jitlé<br>Jame<br>Street address   | After September 13, 200 min. will be \$236.25.  OFFICERS / D BLAKE, JOHN 7801 LOS PINOS BLVD. CORAL GABLES FL 33143   | AND DIRECTORS                | 9. Election Can<br>Trust Fund C  | mpaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS   | Tra Am                                      | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EASURE IT<br>TO HOMACO | Make C<br>Depail<br>S TO OFFICERS AN | theck Payable rtment of Standard Change  | ite IN 10 Addition                  |
| IO.<br>TILLÉ<br>NAME<br>STREET ADDRESS<br>SITY-ST-ZIP  | After September 13, 200 min. will be \$236.25.  OFFICERS O | AND DIRECTORS                | 9. Election Can<br>Trust Fund C  | npaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE   | Tr. Am                                      | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EASURE IT<br>TO HOMACO | Make C<br>Depail<br>S TO OFFICERS AN | theck Payable triment of Standard Change | ite IN 10 Addition                  |
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| IO.  JILÉ  JAME  STREET ADDRESS  SITY-ST-ZIP  JILE  JAME  JIREET ADDRESS  JITY-ST-ZIP  JILE  JITHEET ADDRESS  JITY-ST-ZIP  JILE  | After September 13, 200 min. will be \$236.25.  OFFICERS /  D BLAKE, JOHN 7801 LOS PINOS BLVD. CORAL GABLES FL 33143 D LAWSON, RODOLFO P 7431 MONACO ST CORAL GABLES FL 33143 D   | AND DIRECTORS                | 9. Election Can<br>Trust Fund C  | npaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS   | Tr. Am                                      | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EASURE IT<br>TO HOMACO | Make C<br>Depail<br>S TO OFFICERS AN | Change                                   | IN 10  Addition                     |
| IO.  JILÉ  JAME  STREET ADDRESS  JITY-ST-ZIP  JILE  JAME  JIREET ADDRESS  JITY-ST-ZIP  JILE  JITHEET ADDRESS  JITY-ST-ZIP  JILE  JITHEET ADDRESS  JITY-ST-ZIP  JILE  JAME  | After September 13, 200 min. will be \$236.25.  D BLAKE, JOHN 7801 LOS PINOS BLVD. CORAL GABLES FL 33143 D LAWSON, RODOLFO P 7431 MONACO ST CORAL GABLES FL 33143 D STEWART, CONSUELO   | AND DIRECTORS                | 9. Election Can Trust Fund C   | mpaign Financing Contribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME STREET ADDRESS CITY-ST-ZIP  | Tr. Am                                      | \$5.00 May Be<br>Added to Fees<br>ADDITIONS/CHANGES<br>EASURE IT<br>TO HOMACO | Make C<br>Depail<br>S TO OFFICERS AN | theck Payable triment of Standard Change | IN 10  Addition                     |
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SIGNATURE:

7/23/02 668-6355

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 other like empowered.