

742088

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(Requestor's Name)

\_\_\_\_\_  
(Address)

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(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

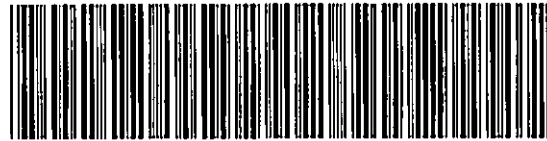
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400320112374

# 742088

corp-32

NP #742088

COCOPLUM CIVIC ASSOCIATION, INC.

(X) New Corporation

( ) Reincorporation

Filed:

3/22/78

By:

4-21-78  
AW

13-78-72 12 \*\*\*\*\*30.0

13-78-72 13000 \*\*\*\*\*3.0

13-78-72 13000 \*\*\*\*\*5.0

RECEIVED  
7 13 10 43 AM '78  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

|             |       |
|-------------|-------|
| G. TAX      | _____ |
| F. FEE      | 30.00 |
| R. AGENT    | 3.00  |
| C. COPY     | 5.00  |
| TOTAL       | 38.00 |
| W. BANK     | _____ |
| BALANCE DUE | _____ |
| SEA. NO.    | _____ |
| PRINT COPY  | _____ |

Ref # R06056

m.

A-1157



## Secretary of State

STATE OF FLORIDA  
THE CAPITOL  
TALLAHASSEE 32304

BRUCE A. SMATHERS  
SECRETARY OF STATE

March 24th, 1988  
F. R. RITTER, Director  
Division of Corporations  
904/486-3140

DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
SUITE 420 -  
650 N. W. 7th STREET  
MIAMI, FLORIDA 33160

DAVID C. MACNAMARA  
ASSISTANT SECRETARY OF STATE

Albert L. Carricarte, P.A.  
2491 N. W. 7th Street  
Miami, FL 33125

Dear Sir:

SUBJECT: COCOPLUM CIVIC ASSOCIATION, INC.

DOCUMENT NUMBER: 742068

This will acknowledge receipt of the following:

1. XX Check(s) totalling \$ 38.00
2. XX Articles of Incorporation filed 3/22/78 Non-Profit
3. \_\_\_\_\_ Amendments to Articles of Incorporation filed
4. \_\_\_\_\_ Articles of Merger or Consolidation filed
5. \_\_\_\_\_ Certificate of Withdrawal filed
6. \_\_\_\_\_ Limited Partnership filed
7. \_\_\_\_\_ Limited Partnership Annual Report filed
8. \_\_\_\_\_ Trademark Application filed
9. \_\_\_\_\_ Application for qualification filed \_\_\_\_\_. It is no longer required to issue a permit. A certificate under seal to this effect may be obtained for \$5.
10. \_\_\_\_\_ Reinstatement filed
11. \_\_\_\_\_ Articles of Dissolution filed
12. \_\_\_\_\_ OTHER:

### ENCLOSED:

1. XX Certified Copy(ies).
2. \_\_\_\_\_ Certificate(s) Under Seal.
3. \_\_\_\_\_ Photocopy(ies).
4. \_\_\_\_\_ OTHER:

ARTICLES OF INCORPORATION  
OF  
COCOPLUM CIVIC ASSOCIATION, INC.

The undersigned subscribers to these Articles of Incorporation, each a natural person competent to contract, hereby associate themselves together to form a corporation, not for profit, under the laws of the State of Florida.

ARTICLE I: NAME

The name of this corporation is:

COCOPLUM CIVIC ASSOCIATION, INC.

ARTICLE II: PURPOSE

The purpose of this corporation shall be:

1. To bring together by association, communication and organization, residents of the Cocoplum development of Coral Gables, Florida.
2. To support and work for the improvement of living conditions, government services and community affairs at Cocoplum and in any areas of interest to the residents of Cocoplum.
3. To provide for the exchange among the members of this Association of such information and ideas related to living conditions in the Cocoplum area.
4. To provide improved recreational facilities and community programs for the children and residents of Cocoplum.

ARTICLE III: MEMBERSHIP

To be eligible (1) for election to membership in this Association, and (2) to continue to hold membership herein, a member (a) must be a resident of Cocoplum, Coral Gables, Florida; (b) must be of good moral character and reputation; (c) must have manifested a genuine interest in, or sympathy with, the purposes of this Association as expressed in Article II hereof.

A-1137

1. Provisions for the conduct of the affairs of the corporation.

2. Provisions creating, dividing, limiting and regulating the powers of the corporation, the directors and the members, including, but not limited to, provisions establishing classes of membership and limiting voting rights to one or more of such classes, or otherwise regulating the voting of members.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this 6<sup>th</sup> day of March, 1978.

Joel Kallan  
JOEL KALLAN

Avis Kallan  
AVIS KALLAN

Robert Stewart  
ROBERT STEWART

Consuelo Stewart  
CONSUELO STEWART

Martin Schwartz  
MARTIN SCHWARTZ

Elaine Schwartz  
ELAINE SCHWARTZ

Albert L. Carricarte  
ALBERT L. CARRICARTE

STATE OF FLORIDA       )  
                              ) SS.  
COUNTY OF DADE       )

I HEREBY CERTIFY that on this date before me, a Notary Public, duly authorized in the state and county aforesaid to take acknowledgments, personally appeared, JOEL KALLAN, AVIS KALLAN, ROBERT STEWART, CONSUELO STEWART, MARTIN SCHWARTZ, ELAINE SCHWARTZ and ALBERT L. CARRICARTE, to me known to be the persons described as subscribers in and who executed the foregoing Articles of Incorporation, and they acknowledged before me that they subscribed to those Articles of Incorporation.

WITNESS my hand and official seal in the County and State aforesaid this 6 day of March, 1978.

My Commission Expires:

Consuelo Stewart  
NOTARY PUBLIC-STATE OF FLORIDA

ALBERT L. CARRICARTE,  
P.A.  
OFFICE OF THE  
NOTARY PUBLIC  
1000 N. W. 10th Street  
Miami, Florida 33136  
Phone: 366-1100

NOTARY PUBLIC-STATE OF FLORIDA  
COMMISSION EXPIRES: MAY 1, 1979  
NOTARY PUBLIC-STATE OF FLORIDA

A-1137

CERTIFICATE OF RESIDENT AGENT

In compliance with Chapter 607.037, Florida Statutes,  
the following is submitted:

First--That COCOPLUM CIVIC ASSOCIATION, INC., with business  
address at 2491 N.W. 7th Street, Miami, Florida 33125.

Has Named-- ALBERT L. CARRICARTE, ESQ., as Registered Agent,  
located at 2491 N.W. 7th Street, Miami, Florida 33125.

The street address of the registered office and the street  
address of the business office of the registered agent, as  
changed, are identical.

SIGNATURE

*W. J. Kellan*  
President or Vice-President

DATE: March 10, 1978

SIGNATURE

*Albert L. Carricarte*  
Registered Agent

DATE: March 10, 1978

#### ARTICLE VII: DIRECTORS

This corporation shall have seven (7) directors initially. The names and addresses of the parties who are to serve as directors until the first election to be held, are as follows:

| <u>NAME</u>          | <u>ADDRESS</u>               |
|----------------------|------------------------------|
| Joel Kallan          | 8280 La Rampa                |
| Avis Kallan          | Cocoplum, Coral Gables, Fla. |
| Robert Stewart       | 8209 Los Pinos Circle        |
| Consuelo Stewart     | Cocoplum, Coral Gables, Fla. |
| Martin Schwartz      | 217 Vistalmar Street         |
| Elaine Schwartz      | Cocoplum, Coral Gables, Fla. |
| Albert L. Carricarte | 225 Vistalmar Street         |
|                      | Cocoplum, Coral Gables, Fla. |

#### ARTICLE VIII: BY-LAWS

The initial by-laws of the corporation shall be made by the majority of the officers and directors, subject, however, to the approval of a majority of the members attending the first general meeting of the corporation.

The method of making, amending, altering or rescinding the by-laws of the corporation shall be by a majority vote of the Board of Directors whose decision must then be approved or rejected by a majority of the membership.

#### ARTICLE IX: AMENDMENTS TO ARTICLES OF INCORPORATION

Any amendments to these Articles of Incorporation may be proposed, in writing, by any three (3) members. Such proposed amendment shall then be given to the Secretary of the corporation who shall furnish a copy thereof to each member. At the next general meeting thereafter, provided not less than five (5) days intervene between the giving of such notice and the date of such next meeting, the proposed amendment shall be considered and, if approved by a majority of those present, shall be adopted.

#### ARTICLE X: GENERAL PROVISIONS

The by-laws of the corporation may provide:

ALBERT L. CARRICARTE,  
P.A.  
ATTORNEY AT LAW  
ONE N. W. 10th Avenue  
Miami, Florida 33136  
Phone 366-1234

Procedure for application, acceptance for membership, suspension and termination of membership, and the amount of dues, fees and assessments shall be determined by a majority vote of the Directors.

ARTICLE IV: TERM OF EXISTENCE

This corporation is to exist perpetually.

ARTICLE V: SUBSCRIBERS

The names and residences of the subscribers are:

| <u>Name</u>                        | <u>Address</u>                                        |
|------------------------------------|-------------------------------------------------------|
| Joel Kallan<br>Avis Kallan         | 8280 La Rampa<br>Cocoplum, Coral Gables, Fla.         |
| Robert Stewart<br>Consuelo Stewart | 8209 Los Pinos Circle<br>Cocoplum, Coral Gables, Fla. |
| Martin Schwartz<br>Elaine Schwartz | 217 Vistalmar Street<br>Cocoplum Coral Gables, Fla.   |
| Albert L. Carricarte               | 225 Vistalmar Street<br>Cocoplum, Coral Gables, Fla.  |

ARTICLE VI: OFFICERS

The affairs of this corporation shall be managed by the following officers: President, Vice-President, Secretary and Treasurer.

The names of the officers who are to serve until the first election to be held at the first general meeting of the corporation are as follows:

President: Avis Kallan  
Vice-President: Consuelo Stewart  
Secretary: Elaine Schwartz  
Treasurer: Albert L. Carricarte

The method of electing, the term of office, and the duties of each respective officer shall be as prescribed by the by-laws.

AMENDMENT  
NON-PROFIT CORPORATION

-----  
A notification letter was mailed to:

Mr. Robert E. Gunn, Esq.  
10th Floor SE 1st National Bank  
Miami, FL 33131

Mailed: 1 Certified Copy  
File Number: 127      Remittance Totaling: \$20.00  
-----

An Amendment to the Articles of Incorporation of:  
COCOPLUM CIVIC ASSOCIATION, INC.

Filed on: April 3, 1979

Charter Number: 742088

742088

Word Processing: April 5, 1979

By: rr

*Amend*

# SHUTTS & BOWEN

ATTORNEYS AND COUNSELLORS AT LAW  
TENTH FLOOR SEVENTH STREET NATIONAL BANK BUILDING  
MIAMI, FLORIDA 33131

JORDAN BITTEL  
STEPHEN A. BLISS  
HARRY N. BOUREAU  
BONNAN BROWN  
WILLARD P. BROWN  
JOHN S. CHODURA  
JAMES F. DUNHAM  
ROBERT E. GUNN  
EARL V. HART  
WILLIAM J. HENDRICK  
MARSHALL J. LANGE  
RICHARD M. LESLIE  
JOHN A. LYNN  
ANTONIO MARTINEZ JR.  
LAWRENCE R. METSCH  
ERIC B. MEYERS  
PHILLIP G. NEWCOMB  
STEPHEN L. PERRONE  
PRESTON L. PREVATT  
ROBERT C. SOMMERVILLE  
JOHN M. TEST  
BRENTON W. EVER FLOEG  
JOHN B. WHITE

THOMAS J. WOLFE  
ANTONIO R. ZAMORA  
TIMOTHY P. BEAL  
ARNOLD L. BERNAN  
JOSEPH C. BOLTON  
BRIAN R. BRATTEBO  
LUIS A. GARRAS  
FRANK R. S. FABRE  
WILLIAM J. GALLWEY JR.  
JOHN A. HART JR.  
EDMUND T. HENAT  
TIMOTHY J. MURPHY  
MARA D. RUGLISE  
MARGARET A. ROLANDO  
PHILIP J. SMITH  
WILLIAM F. SMITH  
LOUIS V. VANDERLIND  
BARBARA C. VANCEVICH  
PATRICIA M. WHIPPLE

PHONE 352-358 0300  
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352-358 0400

APR-58 1 584 \*\*\*\*\*S

March 27, 1979

APR 30 1979  
FILED  
TALLAHASSEE, FLORIDA  
APR 3 9 49 AM '79

State of Florida  
Secretary of State  
Division of Corporations  
The Capitol  
Tallahassee, Florida 32304

Re: Cocoplum Civic Association, Inc.

Gentlemen:

Enclosed herewith are two executed copies of the Articles of Amendment and the Annual Report for 1979 for the above referenced corporation.

A check payable to the Secretary of State in the amount of \$30.00 is enclosed in payment of the following:

|                |                |
|----------------|----------------|
| Filing Fee     | 15.00          |
| Certified Copy | 5.00           |
| Annual Report  | 10.00          |
|                | <u>\$30.00</u> |

Please return the certified copy to the attention of the undersigned in the envelope provided.

Thank you for your attention to this matter.

CHARTER TAX STAMP

Sincerely,

*g4-11*

C. TAX \_\_\_\_\_  
FILING 15 \_\_\_\_\_  
R. AGENT FEE \_\_\_\_\_  
C. COPY 5 \_\_\_\_\_  
TOTAL 20 \_\_\_\_\_  
R. BANK \_\_\_\_\_  
BALANCE DUE \_\_\_\_\_  
REFUND \_\_\_\_\_

*Elizabeth Gregovits*  
Elizabeth Gregovits  
Legal Assistant to  
Robert E. Gunn

REG/eg  
Enclosures

*127*

*TAX*

CORPORATION  
ANNUAL REPORT

1979

THIS REPORT MUST BE ACCOMPANIED BY A STATE

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

## 1. Name and Address of Corporation, Principal Office

Cocoplum Civic Association, Inc.  
2491 NW 7th Street  
Miami, Florida

If above address is incorrect in any way, enter the correct address  
in item 2. Include Zip Code.

7521 Los Pinos Blvd.  
Coral Gables  
Florida 33143

3. Date Incorporated or Qualified  
To Do Business in Florida

3/22/78

4. Federal Employer  
Identification Number  
(FEIN)

N/A

5. Date of  
Last Report

1978

## 6. Names and Street Addresses of Each Officer and Director

| Names of Officers<br>and Directors | Title | Street Address of Each<br>Officer and Director<br>(Do NOT Use Post Office Box Number) | City and State   |
|------------------------------------|-------|---------------------------------------------------------------------------------------|------------------|
| Ramon Sanchez                      | D/P   | 7521 Los Pinos Blvd.                                                                  | Coral Gables, FL |
| Robert F. Gunn                     | D/VP  | 241 Vistalmar Street                                                                  | Coral Gables, FL |
| George Elias, Jr.                  | D/T   | 7250 Monaco Street                                                                    | Coral Gables, FL |
| Robert W. Stewart                  | D/S   | 6209 Los Pinos Circle                                                                 | Coral Gables, FL |
| Elaine Schwartz                    | D     | 217 Vistalmar Street                                                                  | Coral Gables, FL |
| Ralph Jensen                       | D     | 8225 Los Pinos Circle                                                                 | Coral Gables, FL |
| Avis Kallar                        | D     | 8280 La Rampa                                                                         | Coral Gables, FL |

## 7. Registered Agent Information

If you wish to change Registered Agent on this  
form, enter a new information below.

## Name

Albert Carricarte

Street Address (Do NOT Use P.O. Box Number)

2491 NW 7th Street

City, State and Zip Code

Miami, Florida

## Name

Robert F. Gunn

Street Address (Do NOT Use P.O. Box Number)

1000 SE First Natl Bank Bldg.

City, State and Zip Code

Miami, Florida 33131

DO NOT WRITE IN THIS SPACE

## 8. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute  
This Report as Required by Chapter 807 F.S. I Further Certify That I Understand My Signature On  
This Report Shall Have the Same Legal Effects As if Made Under Oath.

## Typed Name of Signing Officer

Ramon Sanchez

## Signature

## Title

President

## Telephone Number

591-9345

## Date

March 26, 1979

ARTICLES OF AMENDMENT  
OF  
COCOPLUM CIVIC ASSOCIATION, INC.

FILED  
APR 3 1949 AM '76  
CLERK OF DISTRICT COURT  
TALLAHASSEE, FLORIDA

Articles II, III, and X of the Articles of Incorporation of COCOPLUM CIVIC ASSOCIATION, INC., a Florida corporation, are hereby amended to read as follows:

ARTICLE II

PURPOSE

The purpose of this corporation shall be

1. To bring together by association, communication and organization, residents and owners of lots in the subdivision of Coral Gables, Florida, known as Cocoplum, Section One (except lots 14 through 21 of Block 1) according to plat thereof recorded in Plat Book 99 at Page 39 of the Public Records of Dade County, Florida.
2. To support and work for the improvement of living conditions, government services and community affairs at Cocoplum and in any areas of interest to the members of the Association.
3. To provide for the exchange among the members of this Association of such information and ideas related to living conditions in the Cocoplum area.
4. To provide improved recreational facilities and community programs for the members.

ARTICLE III

MEMBERSHIP

1. Voting membership in the Association shall be open to all persons who are residents and owners of real property in Cocoplum, Section One, except lots 14 through 21 of Block 1; provided, however, that the owner and resident of each lot shall be entitled to only one vote per lot and the person entitled to cast that ballot shall be certified by said owner and resident to the Secretary of the Association. Whenever a voting member's interest in the subdivision passes from him in any manner whatsoever, voluntarily or involuntarily, the interest of the voting member in this Association shall terminate and he shall have no further interest in this Association.

P. 141

2. Associate membership in the Association shall be open to all persons who are either residents or owners (but not both) of real property in Cocoplum, Section One. Associate members shall not be entitled to vote in the Association, but shall be entitled to all other benefits of members of the Association.

3. Application for membership or associate membership shall be made to the Treasurer.

4. All qualified individuals shall become members or associate members upon submission of their application to the Treasurer and the payment of the prescribed dues.

Article X, General Provisions, is hereby deleted.

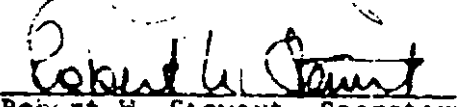
The foregoing Amendment to the Articles of Incorporation of Cocoplum Civic Association, Inc., a Florida corporation, was approved and adopted by the members at a duly noticed membership meeting held on the 8th day of November, 1978.

IN WITNESS WHEREOF, the undersigned President and Secretary of this Corporation, pursuant to the authority given by the members, have executed these Articles of Amendment, this 15<sup>th</sup> day of MARCH, 1979.

(Corporate Seal)

COCOPLUM CIVIC ASSOCIATION, INC.

  
Ramon Sanchez, President

  
Robert W. Stewart, Secretary

STATE OF FLORIDA       )  
                              ) SS.:  
COUNTY OF DADE        )

BEFORE ME, a notary public authorized to administer oaths and take acknowledgments in the state and county set forth above, personally appeared RAMORE SANCHEZ and ROBERT W. STEWART, known to me and known by me to be the persons who executed the foregoing Articles of Amendment as President and Secretary of Cocoplum Civic Association, Inc., a Florida corporation, and they acknowledged to and before me that they executed those Articles of Amendment as President and Secretary, of said Corporation, and that the seal affixed to the foregoing Articles of Amendment is the corporate seal of said Corporation.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the state and county aforesaid, this 15 day of March, 1979.

Robert W. Stewart  
Notary Public, State of Florida  
at Large

My Commission Expires:

3/3/82

CERTIFICATE OF APPROVAL BY MEMBERS

I, ROBERT W. STEWART, Secretary of COCOPLUM CIVIC ASSOCIATION, INC., a Florida corporation, not for profit, hereby certify, as such Secretary and under the seal of this Corporation, that the Articles of Amendment of COCOPLUM CIVIC ASSOCIATION, INC., to which this certificate is attached, was duly submitted to the Members and that such Articles of Amendment were approved at a meeting of the Members; and that thereby the Articles of Amendment were adopted as the act of the Members of COCOPLUM CIVIC ASSOCIATION, INC., and the duly adopted act of said Corporation.

WITNESS my hand and the seal of COCOPLUM CIVIC ASSOCIATION, INC., on this 15<sup>th</sup> day of MARCH, 1979.

COCOPLUM CIVIC ASSOCIATION, INC.

Robert W. Stewart  
Robert W. Stewart, Secretary of  
Cocoplum Civic Association, Inc.  
a Florida corporation, not for  
profit

(CORPORATE SEAL)

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

**CORPORATION  
ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE  
George F. Osborne  
Secretary of State  
DIVISION OF CORPORATIONS

**1980**

THIS REPORT MUST BE ACCOMPANIED BY A \$10 FEE

**READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES  
PLEASE STAPLE CHECK TO ANNUAL REPORT**

|                                                                                                                                                                                      |                                                                                                                                                                                                                   |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>1. Name and Address of Corporation Principal Office:</b><br><input type="checkbox"/> 742088<br>COCOPLUM CIVIC ASSOCIATION, INC.<br>7521 LOS PINOS BLVD.<br>CORAL GABLES, FL 33143 | <b>2. Enter Change of Address of Corporation Principal Office, P.O. Box Number, Address, City, State, Zip Code:</b><br>Street Address: _____<br>P.O. Box No: _____<br>City: _____<br>State: _____ Zip Code: _____ |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

|                                                                                 |                                                                |                                       |
|---------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------|
| <b>3. Date Incorporated or Qualified To Do Business in Florida</b><br>3/22/1976 | <b>4. Federal Employer Identification Number (FEIN)</b><br>N/A | <b>5. Date of Last Report</b><br>1979 |
|---------------------------------------------------------------------------------|----------------------------------------------------------------|---------------------------------------|

**6. Names and Street Addresses of Each Officer and Director**

| Names of Officers and Directors | Title | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State    |
|---------------------------------|-------|----------------------------------------------------------------------------------|-------------------|
| RAMON SANCHEZ                   | D     | 7521 LOS PINOS BLVD.                                                             | CORAL GABLES, FL. |
| ROBERT E. GUNN                  | P/D   | 241 VISTALMAR ST.                                                                | CORAL GABLES, FL. |
| Martin Schwartz                 | VP/D  | 8215 Los Pinos Circle                                                            | CORAL GABLES, FL. |
| ROBERT W. STEWART               | S/D   | 8209 LOS PINOS CIRCLE                                                            | CORAL GABLES, FL. |
| Don Green                       | T/D   | 280 Vistamar St.                                                                 | CORAL GABLES, FL. |
| Jack Gardner                    | D     | 7111 Robles St.                                                                  | CORAL GABLES, FL. |
| Salvador O'Neill                | D     | 3661 S. Miami Avenue                                                             | Miami, FL         |
|                                 |       |                                                                                  |                   |

|                                                                                                                                                                                                 |                                                                                                                                                                                                                     |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>7. Registered Agent Information</b><br>Name<br>ROBERT E. GUNN<br>Street Address (Do NOT Use P.O. Box Number)<br>1000 SE FIRST NATL BANK BLDG.<br>City, State and Zip Code<br>MIAMI, FL 33131 | To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of \$3. |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|

See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

|                                      |                  |                                  |
|--------------------------------------|------------------|----------------------------------|
| Typed Name of Signer: Robert E. Gunn | Title: President | Telephone Number: (305) 358-6300 |
|--------------------------------------|------------------|----------------------------------|

|                                  |                       |
|----------------------------------|-----------------------|
| Signature: <i>Robert E. Gunn</i> | Date: 742088 12-32-80 |
|----------------------------------|-----------------------|

DO NOT WRITE IN THIS SPACE  
 CH 10-14-80

# 742088

REINSTATEMENT

FILED \_\_\_\_\_

INVOLUNTARILY

DISSOLVED

12/16/51

FILED  
89 MAR 31 AM 9:23

REINSTATEMENT 100 00  
CUS 5 00

Registered Agent

Overpayment

72 Privilege Tax

73 Annual Report

74 Annual Report

75 Annual Report

76 Annual Report

77 Annual Report

78 Annual Report

79 Annual Report

80 Annual Report

81 Annual Report 35.00

82 Annual Report

83 Annual Report

84 Annual Report

85 Annual Report

86 Annual Report

87 Annual Report

88 Annual Report

89 Annual Report 35.00

TOTAL \$420.00

REFUND

09/11/89 00014 005  
REINSTATEMENT  
REINSTATEMENT 100.00  
ANNUAL REPORT 315.00  
CERT/PHOTO COPY 5.00  
=====

TOTAL 420.00

TH

CR2E064 (1-89)

**CORPORATION -  
ANNUAL REPORT  
1989**



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED  
31 AUG 31 1989

**1 Name and Address of Corporation Principal Office**

COCOPLUM CIVIL ASSOCIATION, INC.  
7521 LOS PINOS BLVD  
CORAL GABLES, FL. 33143

**2 Enter Change of Address of Corporation Principal Office**

Office P.O. Box Number (Do NOT Use P.O. Box Number) 21  
Street Address 21

P.O. Box No. 22

City and State 23

CORAL GABLES, FLA.  
Zip Code 24  
33143

**3 Date Incorporated or Qualified To Do Business in Florida**

03/22/1978

**4 Federal Employer Identification Number (EIN)**

59-252183

**5 Date of Last Report**

10/14/1980

**6 Names and Street Addresses of Each Officer and Director as of December 31, 1988**

| Title | Name of Officer and Director | Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | City and State    |
|-------|------------------------------|----------------------------------------------------------------------------------|-------------------|
| P     | CONSUELO T. STEWART          | 8209 LOS PINOS CIRCLE                                                            | CORAL GABLES, FL. |
| S/O   | DIANA MONTALBANO             | 7215 LOS PINOS BLVD                                                              | CORAL GABLES, FL. |
| T/O   | MARIANNE K.M. DANIELS        | 190 LOS PINOS CT.                                                                | CORAL GABLES, FL. |
| D     | NESTOR MACHADO               | 7401 VISTALMAR                                                                   | CORAL GABLES, FL. |
| D     | RON DRESNICK                 | 7511 LOS PINOS BLVD                                                              | CORAL GABLES, FL. |
| D     | GIORGIO BALLI                | 8303 OLD CUTLER RD                                                               | CORAL GABLES, FL. |
| D     | CESAR CONDE                  | 1'                                                                               |                   |
| D     | OWEN FREED                   | 550 PUERTA                                                                       | CORAL GABLES, FL. |
| D     | ALBERTO VADIA                | 7433 VISTALMAR                                                                   | CORAL GABLES, FL. |

**7 Name and Address of Current Registered Agent**

ROBERT E. GUNN  
1000 S.E. FIRST NATL BANK BLDG  
MIAMI, FL 33131

**8 Name and Address of New Registered Agent**

CONSUELO T. STEWART  
Street Address 1 (Do NOT Use P.O. Box Number) 82  
8209 LOS PINOS CIRCLE  
Street Address 2 (Do NOT Use P.O. Box Number) 83  
City and State 84  
CORAL GABLES FL.  
Zip Code 85  
33143

I, Pursuant to the provisions of Sections 807.01, 807.02, and 807.03, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, solemnly swears this statement for the purpose of changing its registered agent or registered agent or both in the State of Florida.

Such change was authorized by resolution duly adopted by its Board of Directors on JULY 6, 1989.

I hereby accept the appointment of registered agent, I am familiar with, and accept the obligations of Section 807.02, F.S.

SIGNATURE: Consuelo T. Stewart  
Registered Agent Accepting Appointment

DATE: August 25, 89

**10 If a foreign corporation, state the transacted business in Florida**

**11 See signature restrictions under instructions on reverse side of this form**

I Certify That: I am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 807 F.S.  
I Further Certify That: I understand My Signature On This Report Shall Have the Same Legal Effects As if Made Under Oath.  
Officer or Director signing must be listed in Block 6.

SIGNATURE: Consuelo T. Stewart  
Typed Name of Signing Officer or Director

TITLE: PRESIDENT

DATE: August 25, 89  
Telephone Number: 4458511

**12 Should you desire a certificate of status check the box**

CERTIFICATE OF STATUS DESIRED



CRF-004 (1-89)

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

FD-1300 (Rev. 11-1-88)

DO NOT WRITE IN THIS SPACE

CORPORATION

ANNUAL REPORT  
1990



FLORIDA DEPARTMENT OF STATE  
in conjunction with  
Secretary of State  
DIVISION OF CORPORATIONS

Filing Fee of \$35 Required Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

742088 8

ZIP + 4 PRESORT

COCOPLUM CIVIC ASSOCIATION, INC.  
8209 LOS PINOS CIR.  
CORAL GABLES, FL 33143-6422

2 If Address in Block 1 is incorrect in any way enter the correct address below. PO Box number is NOT sufficient. The NAME of the Corporation cannot be changed only by filing an amendment.

Street Address 2:

PO Box No. 22

City and State 23

Zip Code 24

If above address is incorrect in any way enter the correct address in item 2. Include Zip Code

3 Date Incorporated or Qualified To Do Business in Florida

03/22/1978

4 FEI Number

58-2522183

FEI Number Applied For:  
FEI Number Not Applicable

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| 1 Title | 2 Names of Officers and Directors | 3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | 4 City and State  | 5 |
|---------|-----------------------------------|------------------------------------------------------------------------------------|-------------------|---|
| P       | STEWART, CONSUELO F.              | 8209 LOS PINOS CIR.                                                                | CORAL GABLES, FL. |   |
|         | DANIELS, MARIANNE K.M.            | 190 LOS PINOS CT                                                                   |                   |   |
| S/D     | MONTALBANO, DIANA                 | 7215 LOS PINOS BLVD.                                                               | CORAL GABLES, FL. |   |
|         | BLAKE, JOHN                       | 5354 N.W. 94 PL.                                                                   | MIAMI, FL.        |   |
| T/D     | DANIELS, MARIANNE K.M.            | 190 LOS PINOS CT.                                                                  | CORAL GABLES, FL. |   |
|         | CARROL, LEWIS                     | MONACO                                                                             | CORAL GABLES      |   |
| D       | MACHADO, NESTOR                   | 7401 VISTAL MAR                                                                    | CORAL GABLES, FL. |   |
| D       | DRESNICK, RON                     | 7511 LOS PINOS BLVD.                                                               | CORAL GABLES, FL. |   |
| D       | FREED, OWEN                       | 560 PUERTA                                                                         | CORAL GABLES, FL. |   |
|         | STEWART, CONSUELO F.              | 8209 LOS PINOS CIR.                                                                | 68                |   |

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

STEWART, CONSUELO F.  
8209 LOS PINOS CIR  
CORAL GABLES, FL 33148

8 Name and Address of New Registered Agent

Marianne K. M. Daniels

Street Address (Do NOT Use PO Box Number): R2

190 Los Pinos Court

Street Address 2 (Do NOT Use PO Box Number): R3

City and State B3

Coral Gables

FL.

Zip Code B5

33143

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on:

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.125, F.S.

SIGNATURE

Marianne K.M. Daniels

DATE

(Registered Agent Accepting Appointment)

10 I certify that the information indicated on this annual report or supplemental annual report is true and correct and that my signature shall have the same legal effects as if made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature

Marianne K.M. Daniels

Date

5/14/90

Typed Name of Signing Officer or Director

MARIANNE K.M. DANIELS

Title

PRESIDENT

Telephone Number

(305) 594 7300

11 Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED



742088  
FILED

STEWART DAMSKY MARKUS & KONSKI

A PARTNERSHIP OF PROFESSIONAL ASSOCIATIONS

800 BRICKELL AVENUE

PENTHOUSE

MIAMI, FLORIDA 33131

91 FEB 27 AM 11:18

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

TELEPHONE (904) 398-7755  
(305) 536-2158

TELEPHONE (305) 388-7872

February 25, 1991

Secretary of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, Florida 32314

RE: Articles of Amendment to Articles of Incorporation  
of Cocoplum Civic Association

Gentlemen;

Enclosed herewith please find the following for filing:

1. Original and one (1) copy of the Articles of Amendment for the above referenced.

2. A check in the amount of Eighty Seven Dollars and 50/100, payable to the Secretary of State for the following:

|                |                |
|----------------|----------------|
| Filing Fee     | \$35.00        |
| Certified Copy | <u>\$52.50</u> |

|       |         |
|-------|---------|
| TOTAL | \$87.50 |
|-------|---------|

Once the original Articles have been filed I would appreciate your forwarding the certified copy to this office in the self-addressed stamped envelope provided herewith for your convenience.

If I may be of any further assistance in regard to the aforementioned, please feel free to contact our office.

Sincerely,

Olga M. Miniet

*Olga M. Miniet*

*Ask*

|                |                |
|----------------|----------------|
| Name           |                |
| Availability   |                |
| Document       |                |
| Ex. number     | 16             |
| Updater        | 16             |
| Verity         | 1/3 om         |
| Verity         | 1/3 enclosures |
| Adm. edge. cnt | 16             |
| W. P. Verityer | 16             |

15/J

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF INCORPORATION  
OF  
COCOPLUM CIVIC ASSOCIATION, INC.

**FILED**  
91 FEB 27 AM 11:18  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Pursuant to Fla. Stat. 617.018, the undersigned corporation hereby adopts the following amendments to its Articles of Incorporation:

a. The name of the corporation is Cocoplum Civic Association, Inc.

b. The amendments adopted are as follows:

1) Article III of the Articles of Incorporation is hereby amended to read as follows:

Article III: Capital Stock

1. The corporation shall issue shares of stock in the denominations and amounts provided for below. Such shares of stock shall be evidenced by stock certificates which shall set forth the various restrictions and limitations set forth herein.

2. The authorized stock of the corporation shall consist of Five Hundred (500) shares of common stock with a par value of One Dollar (\$1.00) per share. Each share shall entitle the holder thereof to one vote at meetings of shareholders.

3. No person shall be eligible to acquire or thereafter hold stock of the corporation unless (a) such person shall be the fee simple owner of record of real property located within Cocoplum Section One as recorded in Plat Book 99 at Page 39 of the Public Records of Dade County, Florida, and (b) such person shall have

paid all dues and assessments from time to time levied by the corporation.

4. Every holder of shares shall be entitled to a certificate representing the shares to which such holder shall be entitled. No person may subscribe for more than one (1) share of stock and not more than one (1) share of stock shall be issued to each shareholder.

5. No dividends shall be paid and no part of the income or the assets of the corporation shall be distributed to the shareholders of the corporation.

6. No shareholder of the corporation shall have any vested right, interest or privilege in or to the assets, functions, affairs or franchises of the corporation or any right, interest or privilege which shall be transferable or inheritable or which shall continue if such shareholder shall fail to pay such dues or assessments as may be from time to time fixed by the corporation.

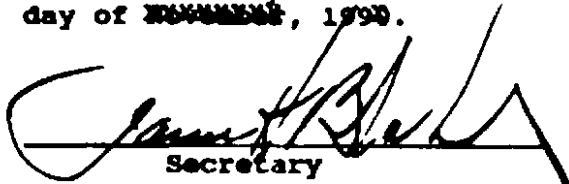
7. Any shareholder wishing to transfer his or her shares shall first offer the corporation the opportunity to acquire such shares at the par value thereof. Any attempted transfer in violation of this requirement shall be void and of no effect.

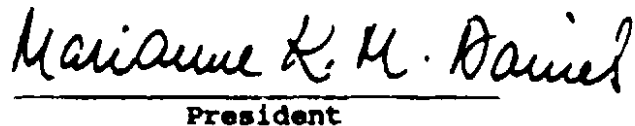
8. Upon failure of any shareholder to pay any dues or assessments levied by the corporation, within thirty (30) days from the date of written notice thereof, the corporation shall have the right to redeem and cancel the shares held by such shareholder by payment of the par value thereof to such shareholder. Any shares so acquired by the corporation shall constitute authorized

but unissued shares.

c. The foregoing amendments were adopted by a majority of the members of the corporation on ~~September 20~~ <sup>February 3</sup>, 1990.

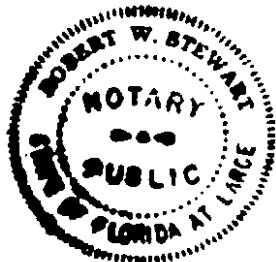
In witness whereof this instrument has been executed on behalf of the corporation by its president and secretary this 23rd day of ~~November~~ <sup>February</sup>, 1990.

  
Secretary

  
President

STATE OF FLORIDA)  
                                  )SS:  
COUNTY OF DADE    )

The foregoing document was acknowledged before me this 23rd day of ~~November~~ <sup>February</sup>, 1990, by Marianne K.M. Daniel and John H. Blake, respectively the President and Secretary of the corporation, on behalf of the corporation.



  
NOTARY PUBLIC, State of Florida  
at Large

My Commission Expires:

NOTARY PUBLIC STATE OF FLORIDA  
BY COMMISSION EXPIRING JUNE 21, 1994  
ISSUED FROM GENERAL INS. CO.

FILE NOW! CORPORATE STATUS WILL BE  
DELINQUENT AFTER JULY 1ST.

CORPORATION  
ANNUAL REPORT  
1991



FLORIDA DEPARTMENT OF STATE  
Jim Smith  
Secretary of State  
DIVISION OF CORPORATIONS

APPROVED  
FL. DEPT. OF STATE  
CORPORATIONS DIV.  
TALLAHASSEE, FL.  
FILED

FILING FEE OF \$61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation **DOCUMENT #742088 (8)**

**ZIP + 4 PRESORT**  
**COCOPLUM CIVIC ASSOCIATION, INC.**  
**8209 LOS PINOS CIR.**  
**CORAL GABLES, FL 33143-8422**

2. If Address in Block 1 is incorrect in any way enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21. Street Address

22. P.O. Box No.

23. City and State

24. Zip Code

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

3. Date Incorporated or Qualified  
To Do Business in Florida

**03/22/1978**

4. FEI Number

**58-2522183**

FEI Number Applied For

5. **\$61.25**

FEI Number Not Applicable

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction to

And to cover over incorrect information.)

| 1. Title      | 2. Names of Officers and Directors | 3. Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | 4. City and State        |
|---------------|------------------------------------|-------------------------------------------------------------------------------------|--------------------------|
| 1. <b>D</b>   | <b>DANIELS, MARIANNE K.H.</b>      | <b>180 LOS PINOS COURT</b>                                                          | <b>CORAL GABLES, FL.</b> |
| 2. <b>T/D</b> | <b>Montalbano, Richard</b>         | <b>7215 Las Pinos Blvd</b>                                                          | <b>Coral Gables, FL.</b> |
| 2. <b>D</b>   | <b>BLAKE, JOHN</b>                 | <b>6364 N.W. 34-PLACE</b>                                                           | <b>MIAMI, FL.</b>        |
| 2. <b>D/D</b> |                                    | <b>3301 LOS PINOS BLVD.</b>                                                         | <b>CORAL GABLES, FL.</b> |
| 3. <b>S/D</b> | <b>CARROL, LEWIS</b>               | <b>MONACO</b>                                                                       | <b>CORAL GABLES, FL.</b> |
| 4. <b>D</b>   | <b>MACHADO, NESTOR</b>             | <b>7401 VISTAL MAR</b>                                                              | <b>CORAL GABLES, FL.</b> |
| 5. <b>D</b>   | <b>DRESNICK, RON</b>               | <b>7511 LOS PINOS BLVD.</b>                                                         | <b>CORAL GABLES, FL.</b> |
| 6. <b>D</b>   | <b>STEWART, CONSUELOT</b>          | <b>8209 LOS PINOS CIRCLE</b>                                                        | <b>CORAL GABLES, FL.</b> |

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**DANIELS, MARIANNE K.H.**  
**180 LOS PINOS COURT**  
**CORAL GABLES, FL 33143**

81. Name

**JOHN H. BLAKE**

82. Street Address 1 (Do NOT Use P.O. Box Number)

**7801 LOS PINOS BLVD.**

83. Street Address 2 (Do NOT Use P.O. Box Number)

84. City

**CORAL GABLES FL.**

85. Zip Code

**33143**

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors.

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE

(Registered Agent Accepting Appointment)

DATE **MAR. 12, 1991**

10. I certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE

DATE **MAR. 12, 1991**

Typed Name of Signing Officer or Director

**JOHN H. BLAKE**

Title

**PRESIDENT**

Telephone Number (Daytime)

**(305) 381-8432**

FILING FEE OF \$61.25 REQUIRED. Max. Checks Payable To: Secretary of State \$61.25

**2ND NOTICE FILE NOW! CORPORATION WILL BE  
DISSOLVED ON OR AFTER OCTOBER 7, 1992.**

CORPORATION

ANNUAL REPORT  
1992



FLORIDA DEPARTMENT OF STATE  
Joni Smith  
Secretary of State  
DIVISION OF CORPORATIONS

FILING FEE \$61.25 Make Payable To: Secretary of State

1. Name and Mailing Address of Corporation **DOCUMENT #742088 (8)**

**COCOPLUM CIVIC ASSOCIATION, INC.  
8209 LOS PINOS CIR  
CORAL GABLES FL 33143-6422**

2. If Address in Block 1 is a correction, write the correct address in Block 2. If P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State

24 Zip Code

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2.

3. Date Incorporated or Qualified To Do Business in Florida

**03/22/1978**

3a. Date of Last Report

**04/01/1991**

4. FEI Number

**59-2522183**

FEI Number Applied For

**\$6.75**

FEI Number Not Applicable

CERTIFICATE OF STATUS DESIRED ☒

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| 1 Title    | 2 Names of Officers and Directors | 3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | 4 City and State         |
|------------|-----------------------------------|------------------------------------------------------------------------------------|--------------------------|
| <b>D/T</b> | <b>BORG, BRUCE, JR.</b>           | <b>8251 LA RAMPA STREET</b>                                                        | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>DANIELS, MARLENE R.H.</b>      | <b>100 LOS PINOS COURT</b>                                                         | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>CHERRARD, MIRIAM</b>           | <b>7556 LOS PINOS BLVD.</b>                                                        | <b>CORAL GABLES, FL.</b> |
| <b>P/D</b> | <b>BLAKE, JOHN</b>                | <b>7801 LOS PINOS BLVD.</b>                                                        | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>BLANCHARD, DOMINIQUE</b>       | <b>351 LOS PINOS PLACE</b>                                                         | <b>CORAL GABLES, FL.</b> |
| <b>S/E</b> | <b>CARROLL, LEWIS</b>             | <b>MONACO</b>                                                                      | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>CORBITT, RONALD</b>            | <b>7400 MONACO STREET</b>                                                          | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>MACHADO, NESTOR</b>            | <b>7401 VISTAL MAR</b>                                                             | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>TURRES, JULIO</b>              | <b>7808 LOS PINOS CIRCLE</b>                                                       | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>DRESNICK, RON</b>              | <b>7511 LOS PINOS BLVD.</b>                                                        | <b>CORAL GABLES, FL.</b> |
| <b>D</b>   | <b>STEWART, CONSUELOT</b>         | <b>8209 LOS PINOS CIRCLE</b>                                                       | <b>CORAL GABLES, FL.</b> |

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

**BLAKE, JOHN H.  
7801 LOS PINOS BLVD.  
CORAL GABLES, FL 33143**

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City

**FL.**

85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508 of Sections 617.0502 and 617.1508, Florida Statutes, the above named corporation submits this statement for the purpose of changing its registered office or registered agent or both in the State of Florida. Such change was authorized by the corporation or board of directors.

I hereby accept the appointment as registered agent. I am familiar with and accept all the obligations of Section 607.0505, Florida Statutes.

REGISTERED AGENT'S SIGNATURE

DATE **AUG. 9, 1992**

10. Does this corporation pay any intangible tax to the  
Dept. of Revenue under S. 199.032, Florida Statutes. Yes ☐ No ☒

11. I certify that the information indicated on this annual report or supplemental annual reports is true and accurate and that the signature shall have the same legal effect as if made under oath. I further certify 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 6 (relates to Block 6 only).

SIGNATURE

DATE **AUG. 9, 1992**

Print/Type Name of Signing Officer or Director

Title

**JOHN H. BLAKE**

**PRESIDENT**

**(305) 331-8432 EXT. 30**

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional \$5.00 to the filing fee. ☐

CR2003 (8/92)

**File Now. Filing Fee after May 1 is \$225.00**

**CORPORATION  
ANNUAL REPORT  
1993**



THE FLORIDA DEPARTMENT OF  
REVENUE  
DIVISION OF CORPORATE TAXES  
TALLAHASSEE, FLORIDA 32311-0001

1. Name and Mailing Address of Corporation **DOCUMENT # 742088 (8)**

**COCOPLIN CIVIC ASSOCIATION, INC.  
8209 LOS PINOS CIR  
CORAL GABLES FL 33143-6422**

If above mailing address is different from the actual office address, please enter the actual office address in Block 2.

**FILING FEE \$200.00 ANNUAL REPORT \$61.25 + \$138.75 CORPORATION SUPPLEMENTAL FEE  
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE**

**03/22/1978**

**10/05/1992**

**592522183**

2. Mailing Address

21

2a. Principal Place of Business

26

3. Certificate of Status

**X**

**\$6.75**

Subs. Apt. #, etc.

22

Subs. Apt. #, etc.

27

4. Amount of Franchise Tax

**\$5.00 Min. Franchise Tax**

City & State

23

City & State

28

5. Amount of Supplemental Fee

**\$138.75 Supplemental Fee Not Required**

Zip

Country

24

Zip

Country

29

30

6. Amount of Franchise Tax

**X**

8. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BLAKE, JOHN H.  
7801 LOS PINOS BLVD.  
CORAL GABLES FL 33143**

81. Name

82. Street Address

83

84. City

**FL**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or Sections 611.0502 and 611.1508, Florida Statutes, the undersigned hereby certify that the information furnished herein is true and correct, and that the corporation is duly organized and in good standing under the laws of the State of Florida, and that the undersigned is duly qualified to act as a registered agent for the corporation in the State of Florida, and that the undersigned is duly qualified to act as a registered agent for the corporation in the State of Florida, and that the undersigned is duly qualified to act as a registered agent for the corporation in the State of Florida.

SIGNATURE

Registered Agent & each Director

12. OFFICERS AND DIRECTORS

13. OFFICERS AND DIRECTORS

1.1 TITLE

**D/T  
BOROS, BRUCE, DR.  
8251 LA MIPIA ST  
CORAL GABLES FL**

1.2 NAME

1.3 ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

**P/D  
BLAKE, JOHN  
7801 LOS PINOS BLVD.  
CORAL GABLES FL**

2.2 NAME

2.3 ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

**S/E  
CARROLL, LEWIS  
MONACO  
CORAL GABLES FL**

3.2 NAME

3.3 ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

**D  
BACHINO, NESTOR  
7401 VISTAL MAR  
CORAL GABLES FL**

4.2 NAME

4.3 ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

**D  
BRENNICK, RON  
7511 LOS PINOS BLVD.  
CORAL GABLES FL**

5.2 NAME

5.3 ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

**D  
STEWART, CONQUELOT  
8209 LOS PINOS CIRCLE  
CORAL GABLES FL**

6.2 NAME

6.3 ADDRESS

6.4 CITY-ST-ZIP

14. I certify that the information indicated on this annual report or supplemental annual report is true and correct, and that the corporation is duly organized and in good standing under the laws of the State of Florida, and that the undersigned is duly qualified to act as a registered agent for the corporation in the State of Florida, and that the undersigned is duly qualified to act as a registered agent for the corporation in the State of Florida, and that the undersigned is duly qualified to act as a registered agent for the corporation in the State of Florida.

SIGNATURE

Print/Type Name of Signing Officer or Director

Title

Central Telephone Number

**JOHN H. BLAKE**

**PRESIDENT**

**(305) 669-9661**

**APRIL 4, 1993**

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

|                                                                |  |                                                                                                                                                                                 |  |
|----------------------------------------------------------------|--|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| <b>CORPORATION<br/>ANNUAL REPORT<br/>1994</b>                  |  | <br>FLORIDA DEPARTMENT OF STATE<br>Jim Smith<br>Secretary of State<br>DIVISION OF CORPORATIONS |  |
| 1. Corporation Name<br><b>COCOPLUM CIVIC ASSOCIATION, INC.</b> |  | <b>DOCUMENT #<br/>742088 (8)</b>                                                                                                                                                |  |

**APPROVED  
AND  
FILED**

94 MAR 14 AM 10:20

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

|                                                         |                                                                     |
|---------------------------------------------------------|---------------------------------------------------------------------|
| Mailing Address<br><b>XXXXXXXXXXXX<br/>XXXXXXXXXXXX</b> | Principal Place of Business<br><b>XXXXXXXXXXXX<br/>XXXXXXXXXXXX</b> |
|---------------------------------------------------------|---------------------------------------------------------------------|

DO NOT WRITE IN THIS SPACE

|                                                                                |  |                                                                                             |  |                                                                                                                                                           |                                                                                         |
|--------------------------------------------------------------------------------|--|---------------------------------------------------------------------------------------------|--|-----------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
| 2. Mailing Address<br>21 <b>7801 Los Pinos Blvd.</b><br>22 Suite, Apt. #, etc. |  | 26. Principal Place of Business<br>26 <b>7801 Los Pinos Blvd.</b><br>27 Suite, Apt. #, etc. |  | 3. Date Incorporated or Qualified<br><b>03/22/1978</b>                                                                                                    | 3a. Date of Last Report<br><b>04/08/1983</b>                                            |
| 23 <b>Coral Gables, Fl.</b><br>24 <b>33143</b> 25 <b>Dade</b>                  |  | 28 <b>Coral Gables, Fl.</b><br>29 <b>33143</b> 30 <b>Dade</b>                               |  | 4. FEI Number<br><b>59-2522183</b>                                                                                                                        | 5. Certificate of Status Desired<br><b>\$8.75</b>                                       |
|                                                                                |  |                                                                                             |  | 7. Nonprofit Exempt from S-Corp<br>Supplemental Fee                                                                                                       | 8. Director, Secretary, Treasurer, and Controller<br><b>\$5.00 May Be Added to Fees</b> |
|                                                                                |  |                                                                                             |  | 9. This corporation has assets for intangible tax under Chapter 206, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No |                                                                                         |

|                                                                                                                             |  |                                                                                                                                                    |  |
|-----------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------|--|
| 8. Name and Address of Current Registered Agent<br><b>BLAKE, JOHN H.<br/>7801 LOS PINOS BLVD.<br/>CORAL GABLES FL 33143</b> |  | 10. Name and Address of New Registered Agent<br>81 Name<br>82 Street Address, P.O. Box Number & Not A, U.S. & Foreign<br>83<br>84 City, State, Zip |  |
|-----------------------------------------------------------------------------------------------------------------------------|--|----------------------------------------------------------------------------------------------------------------------------------------------------|--|

11. Forward to the provisions of Sections 607.0502 and 607.1502 or Sections 607.0502 and 607.1502, Florida Statutes, the above named corporation is subject to the provisions of the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change may be effected by a corporation, its board of directors, its officers, or its authorized agent, and shall be subject to the provisions of Sections 607.0502 and 607.1502, Florida Statutes.

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

|                                                                   |                                                                   |                                                                   |                                                                   |
|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|-------------------------------------------------------------------|
| 12. OFFICERS AND DIRECTORS                                        |                                                                   | 13. CHANGES TO OFFICERS AND DIRECTORS                             |                                                                   |
| 11 NAME<br>12 NAME<br>13 STREET ADDRESS<br>14 CITY, STATE, ZIP    | 11 NAME<br>12 NAME<br>13 STREET ADDRESS<br>14 CITY, STATE, ZIP    | 11 NAME<br>12 NAME<br>13 STREET ADDRESS<br>14 CITY, STATE, ZIP    | 11 NAME<br>12 NAME<br>13 STREET ADDRESS<br>14 CITY, STATE, ZIP    |
| 15 NAME<br>16 NAME<br>17 STREET ADDRESS<br>18 CITY, STATE, ZIP    | 15 NAME<br>16 NAME<br>17 STREET ADDRESS<br>18 CITY, STATE, ZIP    | 15 NAME<br>16 NAME<br>17 STREET ADDRESS<br>18 CITY, STATE, ZIP    | 15 NAME<br>16 NAME<br>17 STREET ADDRESS<br>18 CITY, STATE, ZIP    |
| 19 NAME<br>20 NAME<br>21 STREET ADDRESS<br>22 CITY, STATE, ZIP    | 19 NAME<br>20 NAME<br>21 STREET ADDRESS<br>22 CITY, STATE, ZIP    | 19 NAME<br>20 NAME<br>21 STREET ADDRESS<br>22 CITY, STATE, ZIP    | 19 NAME<br>20 NAME<br>21 STREET ADDRESS<br>22 CITY, STATE, ZIP    |
| 23 NAME<br>24 NAME<br>25 STREET ADDRESS<br>26 CITY, STATE, ZIP    | 23 NAME<br>24 NAME<br>25 STREET ADDRESS<br>26 CITY, STATE, ZIP    | 23 NAME<br>24 NAME<br>25 STREET ADDRESS<br>26 CITY, STATE, ZIP    | 23 NAME<br>24 NAME<br>25 STREET ADDRESS<br>26 CITY, STATE, ZIP    |
| 27 NAME<br>28 NAME<br>29 STREET ADDRESS<br>30 CITY, STATE, ZIP    | 27 NAME<br>28 NAME<br>29 STREET ADDRESS<br>30 CITY, STATE, ZIP    | 27 NAME<br>28 NAME<br>29 STREET ADDRESS<br>30 CITY, STATE, ZIP    | 27 NAME<br>28 NAME<br>29 STREET ADDRESS<br>30 CITY, STATE, ZIP    |
| 31 NAME<br>32 NAME<br>33 STREET ADDRESS<br>34 CITY, STATE, ZIP    | 31 NAME<br>32 NAME<br>33 STREET ADDRESS<br>34 CITY, STATE, ZIP    | 31 NAME<br>32 NAME<br>33 STREET ADDRESS<br>34 CITY, STATE, ZIP    | 31 NAME<br>32 NAME<br>33 STREET ADDRESS<br>34 CITY, STATE, ZIP    |
| 35 NAME<br>36 NAME<br>37 STREET ADDRESS<br>38 CITY, STATE, ZIP    | 35 NAME<br>36 NAME<br>37 STREET ADDRESS<br>38 CITY, STATE, ZIP    | 35 NAME<br>36 NAME<br>37 STREET ADDRESS<br>38 CITY, STATE, ZIP    | 35 NAME<br>36 NAME<br>37 STREET ADDRESS<br>38 CITY, STATE, ZIP    |
| 39 NAME<br>40 NAME<br>41 STREET ADDRESS<br>42 CITY, STATE, ZIP    | 39 NAME<br>40 NAME<br>41 STREET ADDRESS<br>42 CITY, STATE, ZIP    | 39 NAME<br>40 NAME<br>41 STREET ADDRESS<br>42 CITY, STATE, ZIP    | 39 NAME<br>40 NAME<br>41 STREET ADDRESS<br>42 CITY, STATE, ZIP    |
| 43 NAME<br>44 NAME<br>45 STREET ADDRESS<br>46 CITY, STATE, ZIP    | 43 NAME<br>44 NAME<br>45 STREET ADDRESS<br>46 CITY, STATE, ZIP    | 43 NAME<br>44 NAME<br>45 STREET ADDRESS<br>46 CITY, STATE, ZIP    | 43 NAME<br>44 NAME<br>45 STREET ADDRESS<br>46 CITY, STATE, ZIP    |
| 47 NAME<br>48 NAME<br>49 STREET ADDRESS<br>50 CITY, STATE, ZIP    | 47 NAME<br>48 NAME<br>49 STREET ADDRESS<br>50 CITY, STATE, ZIP    | 47 NAME<br>48 NAME<br>49 STREET ADDRESS<br>50 CITY, STATE, ZIP    | 47 NAME<br>48 NAME<br>49 STREET ADDRESS<br>50 CITY, STATE, ZIP    |
| 51 NAME<br>52 NAME<br>53 STREET ADDRESS<br>54 CITY, STATE, ZIP    | 51 NAME<br>52 NAME<br>53 STREET ADDRESS<br>54 CITY, STATE, ZIP    | 51 NAME<br>52 NAME<br>53 STREET ADDRESS<br>54 CITY, STATE, ZIP    | 51 NAME<br>52 NAME<br>53 STREET ADDRESS<br>54 CITY, STATE, ZIP    |
| 55 NAME<br>56 NAME<br>57 STREET ADDRESS<br>58 CITY, STATE, ZIP    | 55 NAME<br>56 NAME<br>57 STREET ADDRESS<br>58 CITY, STATE, ZIP    | 55 NAME<br>56 NAME<br>57 STREET ADDRESS<br>58 CITY, STATE, ZIP    | 55 NAME<br>56 NAME<br>57 STREET ADDRESS<br>58 CITY, STATE, ZIP    |
| 59 NAME<br>60 NAME<br>61 STREET ADDRESS<br>62 CITY, STATE, ZIP    | 59 NAME<br>60 NAME<br>61 STREET ADDRESS<br>62 CITY, STATE, ZIP    | 59 NAME<br>60 NAME<br>61 STREET ADDRESS<br>62 CITY, STATE, ZIP    | 59 NAME<br>60 NAME<br>61 STREET ADDRESS<br>62 CITY, STATE, ZIP    |
| 63 NAME<br>64 NAME<br>65 STREET ADDRESS<br>66 CITY, STATE, ZIP    | 63 NAME<br>64 NAME<br>65 STREET ADDRESS<br>66 CITY, STATE, ZIP    | 63 NAME<br>64 NAME<br>65 STREET ADDRESS<br>66 CITY, STATE, ZIP    | 63 NAME<br>64 NAME<br>65 STREET ADDRESS<br>66 CITY, STATE, ZIP    |
| 67 NAME<br>68 NAME<br>69 STREET ADDRESS<br>70 CITY, STATE, ZIP    | 67 NAME<br>68 NAME<br>69 STREET ADDRESS<br>70 CITY, STATE, ZIP    | 67 NAME<br>68 NAME<br>69 STREET ADDRESS<br>70 CITY, STATE, ZIP    | 67 NAME<br>68 NAME<br>69 STREET ADDRESS<br>70 CITY, STATE, ZIP    |
| 71 NAME<br>72 NAME<br>73 STREET ADDRESS<br>74 CITY, STATE, ZIP    | 71 NAME<br>72 NAME<br>73 STREET ADDRESS<br>74 CITY, STATE, ZIP    | 71 NAME<br>72 NAME<br>73 STREET ADDRESS<br>74 CITY, STATE, ZIP    | 71 NAME<br>72 NAME<br>73 STREET ADDRESS<br>74 CITY, STATE, ZIP    |
| 75 NAME<br>76 NAME<br>77 STREET ADDRESS<br>78 CITY, STATE, ZIP    | 75 NAME<br>76 NAME<br>77 STREET ADDRESS<br>78 CITY, STATE, ZIP    | 75 NAME<br>76 NAME<br>77 STREET ADDRESS<br>78 CITY, STATE, ZIP    | 75 NAME<br>76 NAME<br>77 STREET ADDRESS<br>78 CITY, STATE, ZIP    |
| 79 NAME<br>80 NAME<br>81 STREET ADDRESS<br>82 CITY, STATE, ZIP    | 79 NAME<br>80 NAME<br>81 STREET ADDRESS<br>82 CITY, STATE, ZIP    | 79 NAME<br>80 NAME<br>81 STREET ADDRESS<br>82 CITY, STATE, ZIP    | 79 NAME<br>80 NAME<br>81 STREET ADDRESS<br>82 CITY, STATE, ZIP    |
| 83 NAME<br>84 NAME<br>85 STREET ADDRESS<br>86 CITY, STATE, ZIP    | 83 NAME<br>84 NAME<br>85 STREET ADDRESS<br>86 CITY, STATE, ZIP    | 83 NAME<br>84 NAME<br>85 STREET ADDRESS<br>86 CITY, STATE, ZIP    | 83 NAME<br>84 NAME<br>85 STREET ADDRESS<br>86 CITY, STATE, ZIP    |
| 87 NAME<br>88 NAME<br>89 STREET ADDRESS<br>90 CITY, STATE, ZIP    | 87 NAME<br>88 NAME<br>89 STREET ADDRESS<br>90 CITY, STATE, ZIP    | 87 NAME<br>88 NAME<br>89 STREET ADDRESS<br>90 CITY, STATE, ZIP    | 87 NAME<br>88 NAME<br>89 STREET ADDRESS<br>90 CITY, STATE, ZIP    |
| 91 NAME<br>92 NAME<br>93 STREET ADDRESS<br>94 CITY, STATE, ZIP    | 91 NAME<br>92 NAME<br>93 STREET ADDRESS<br>94 CITY, STATE, ZIP    | 91 NAME<br>92 NAME<br>93 STREET ADDRESS<br>94 CITY, STATE, ZIP    | 91 NAME<br>92 NAME<br>93 STREET ADDRESS<br>94 CITY, STATE, ZIP    |
| 95 NAME<br>96 NAME<br>97 STREET ADDRESS<br>98 CITY, STATE, ZIP    | 95 NAME<br>96 NAME<br>97 STREET ADDRESS<br>98 CITY, STATE, ZIP    | 95 NAME<br>96 NAME<br>97 STREET ADDRESS<br>98 CITY, STATE, ZIP    | 95 NAME<br>96 NAME<br>97 STREET ADDRESS<br>98 CITY, STATE, ZIP    |
| 99 NAME<br>100 NAME<br>101 STREET ADDRESS<br>102 CITY, STATE, ZIP | 99 NAME<br>100 NAME<br>101 STREET ADDRESS<br>102 CITY, STATE, ZIP | 99 NAME<br>100 NAME<br>101 STREET ADDRESS<br>102 CITY, STATE, ZIP | 99 NAME<br>100 NAME<br>101 STREET ADDRESS<br>102 CITY, STATE, ZIP |

14. I do hereby certify that the information submitted with this filing is voluntarily furnished and does not qualify for the exemption provided in Section 607.0502, Florida Statutes, and that the information indicated on this annual report or supplemental annual report is true and accurate and that the signature shall have the same legal effect as if made by the person that I have indicated as being the person who has been authorized by Chapter 607, Florida Statutes, to file this report on behalf of the corporation, and that the name appears in the name of the corporation as it appears in the records of the Division of Corporations.

SIGNATURE: *Karl J. ...* 2/11/84 305-443-6183