## 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 745886** 

Apr 30, 2009 Secretary of State

Entity Name: CORAL GARDEN APARTMENTS, INC. **Current Principal Place of Business: New Principal Place of Business:** 1025 S FEDERAL HWY LAKE WORTH, FL 33460 **Current Mailing Address: New Mailing Address:** 5112 ARBOR GLEN CIRCLE LAKE WORTH, FL 33463 FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ATLANTIC FULCRUM, INC 5112 ARBOR GLEN CIRCLE LAKE WORTH, FL 33463 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. SIGNATURE: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Change () Addition () Delete KORPI, KEITH Name: Name: Address: 1025 S. FEDERAL HWY., # 2 Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip: Title: VPD () Delete Title: () Change () Addition Name: VILEN, PENTTI Name: Address: 1025 S. FEDERAL HWY., #7 Address: City-St-Zip: LAKE WORTH, FL City-St-Zip: Title: () Delete Title: () Change () Addition OJALA, ESA Name: Name: 1025 S FEDERAL HWY., # 8 Address: Address: City-St-Zip: LAKE WORTH, FL 33460 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: PENTTI VILEN D 04/30/2009