

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748792

FILED
Feb 05, 2009
Secretary of State

Entity Name: CORONA BAY ASSOCIATION, INC.

Current Principal Place of Business:

3810 NE 6TH AVE
MIAMI, FL 33137 US

New Principal Place of Business:

Current Mailing Address:

3810 NE 6TH AVE
MIAMI, FL 33137 US

New Mailing Address:

FEI Number: 59-2264778

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REGATTA REAL ESTATE MANAGEMENT
309 23RD STREET SUITE 300
MIAMI BEACH, FL 33139 US

Name and Address of New Registered Agent:

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:

Title: PD () Delete
Name: STRAWSER, DARRYL
Address: 3804 NE 6TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: TD () Delete
Name: RUGGIERI, STEVE
Address: 3808 NE 6TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: VD () Delete
Name: KEOVILAY, MAUNI
Address: 517 NE 38TH ST
City-St-Zip: MIAMI, FL 33137

Title: SD () Delete
Name: GENOVESI, JOE
Address: 509 NE 38TH ST
City-St-Zip: MIAMI, FL 33137

Title: D () Delete
Name: PRINCE, SHELDON
Address: 511 NE 38TH ST
City-St-Zip: MIAMI, FL 33137

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: STRAWSER, DARRYL
Address: 3804 NE 6TH AVENUE
City-St-Zip: MIAMI, FL 33137

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: VP (X) Change () Addition
Name: KEOVILAY, MAUNI
Address: 517 NE 38TH ST
City-St-Zip: MIAMI, FL 33137

Title: SD (X) Change () Addition
Name: JONES, DARREN
Address: 509 NE 38TH ST
City-St-Zip: MIAMI, FL 33137

Title: PD (X) Change () Addition
Name: TRASOBARES, ALEX
Address: 511 NE 38TH ST
City-St-Zip: MIAMI, FL 33137

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: ALEX TRASOBARES

PD

02/05/2009

Electronic Signature of Signing Officer or Director

Date