

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 09, 2004 8:00 am
Secretary of State

04-09-2004 90072 018 ****61.25

DOCUMENT # 749541

1. Entity Name

COSTA DEL SOL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

**5801 N BANANA RIVER BLVD #958
CAPE CANAVERAL FL 32920
US**

Mailing Address

**5801 N BANANA RIVER BLVD
#958
CAPE CANAVERAL FL 32920
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

59-2177640

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**PICKLES, TIMOTHY
1970 MICHIGAN AVE STE C
COCOA BEACH FL 32923**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: **STD** ☐ Delete
NAME: **RUTH ELLIOTT**
STREET ADDRESS: **5800 N. BANANA RV. BLVD. #235**
CITY-ST-ZIP: **CAPE CANAVERAL FL 32920**

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

TITLE: **Board Member** ☐ Delete
NAME: **DUNN, MARCIA**
STREET ADDRESS: **5807 N. BANANA RV BLVD. #1221**
CITY-ST-ZIP: **CAPE CANAVERAL FL 32920**

TITLE: **Board Member** ☒ Change ☐ Addition
NAME: **Marcia Dunn**
STREET ADDRESS: **5807 N Banana Rv Blvd #1221**
CITY-ST-ZIP: **Cape Canaveral, FL 32920**

TITLE: **D** ☒ Delete
NAME: **CAIN, MAURICE**
STREET ADDRESS: **5803 N BANANA RIVER BLVD #1032**
CITY-ST-ZIP: **CAPE CANAVERAL FL 32920**

TITLE: **Board Member** ☐ Change ☒ Addition
NAME: **John Przybocki**
STREET ADDRESS: **5807 N Banana Rv Blvd #1235**
CITY-ST-ZIP: **Cape Canaveral, FL 32920**

TITLE: **J** ☐ Delete
NAME: **JOSEPH, MAYER**
STREET ADDRESS: **5807 N. ATLANTIC AVE. #423**
CITY-ST-ZIP: **CAPE CANAVERAL FL 32920**

TITLE: **Vice President** ☒ Change ☐ Addition
NAME: **Joseph, Mayer**
STREET ADDRESS: **5807 N Atlantic Ave #423**
CITY-ST-ZIP: **Cape Canaveral, FL 32920**

TITLE: **P** ☒ Delete
NAME: **BERGHERM, DON**
STREET ADDRESS: **5800 N BANANA RV BLVD #127**
CITY-ST-ZIP: **CAPE CANAVERAL FL 32920**

TITLE: **President** ☐ Change ☒ Addition
NAME: **Carole Gabrini**
STREET ADDRESS: **5800 N Banana Rv Blvd #227**
CITY-ST-ZIP: **Cape Canaveral, FL 32920**

TITLE: ☐ Delete
NAME: ☐ Delete
STREET ADDRESS: ☐ Delete
CITY-ST-ZIP: ☐ Delete

TITLE: ☐ Change ☐ Addition
NAME: ☐ Change ☐ Addition
STREET ADDRESS: ☐ Change ☐ Addition
CITY-ST-ZIP: ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: *Ruth Elliott*

Ruth Elliott

321-799-4575

4/7/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #