2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#749616

FILED Aug 04, 2005 Secretary of State

Entity Name: COACH GATE CONDOMINIUM ASSOCIATION, INC.

Electronic Signature of Registered Agent

Current Principal Place of Business:	New Principal Place of Business:
107 MACFARLANE DR #201 DELRAY BEACH, FL 334836832 US	107 MACFARLANE DR #104 DELRAY BEACH, FL 334836832 US
Current Mailing Address:	New Mailing Address:
107 MACFARLANE DRIVE 201 C/O PAMELA GOFFMAN DELRAY BEACH, FL 33483 US	107 MACFARLANE DRIVE 104 C/O HUNTER JONES DELRAY BEACH, FL 33483 US
FEI Number: 65-0400972 FEI Number Applied For() FEI Number Applied For(
GOFFMAN, PAMELA 107 MACFARLANE DRIVE #201 DELRAY BEACH, FL 33483 US	JONES, HUNTER 107 MACFARLANE DRIVE #104 DELRAY BEACH, FL 33483 US
The above named entity submits this statement for the purpose on the State of Florida.	of changing its registered office or registered agent, or both,
SIGNATURE: HUNTER JONES	08/04/2005

OFFICERS AND DIRECTORS:

() Delete

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Change () Addition

Date

SIGNORELLI, JOHN Name: Name: Address: 107 MACFARLANE DR #103 Address: City-St-Zip: City-St-Zip: DELRAY BEACH, FL 33483 Title: () Delete Title: () Change () Addition REINGOLD, MARK Name: Name: 107 MACFARLANE DRIVE, #204 Address: Address: City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: Title: STD () Delete Title: STD (X) Change () Addition GOFFMAN, PAMELA Name: Name: JONES, HUNTER 107 MACFARLANE DRIVE #104 107 MACFARLANE DRIVE #201 Address: Address: City-St-Zip: DELRAY BEACH, FL 33483 City-St-Zip: DELRAY BEACH, FL 33483

I hereby certify that the information supplied with this filing does not qualify for the 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 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: HUNTER JONES STD 08/04/2005