

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749616

FILED
Jul 08, 2008
Secretary of State

Entity Name: COACH GATE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

107 MACFARLANE DR,
DELRAY BEACH, FL 33483 US

New Principal Place of Business:

Current Mailing Address:

107 MACFARLANE DR,
204
DELRAY BEACH, FL 33483 US

New Mailing Address:

FEI Number: 65-0400972 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

REINGOLD, MARK S
107 MACFARLANE DRIVE
204
DELRAY BEACH, FL 33483 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: REINGOLD, MARK S
Address: 107 MACFARLANE DR #204
City-St-Zip: DELRAY BEACH, FL 33483

Title: VPD () Delete
Name: ADE, ROBERT
Address: 107 MACFARLANE DR., 104
City-St-Zip: DELRAY BEACH, FL 33483

Title: STD () Delete
Name: LUNDERGAN, CHARLOTTE
Address: 107 MACFARLANE DR., 103
City-St-Zip: DELRAY BEACH, FL 33483

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: TIBE, ALISSA L
Address: 107 MACFARLANE DR., 101
City-St-Zip: DELRAY BEACH, FL 33483

Title: STD (X) Change () Addition
Name: DOBSON, CHAD E
Address: 107 MACFARLANE DR., 102
City-St-Zip: DELRAY BEACH, FL 33483

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: CHAD E. DOBSON

STD

07/08/2008

Electronic Signature of Signing Officer or Director

_____ Date