

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750747

FILED
Jan 12, 2007
Secretary of State

Entity Name: CORAL TIDES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

580 BRINY AVE.
POMPANO BEACH, FL 330625808

New Principal Place of Business:

Current Mailing Address:

580 BRINY AVE.
POMPANO BEACH, FL 330625808

New Mailing Address:

FEI Number: 59-2159036

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REILLY, JOSEPH P.
1330 SE 3RD TERRACE
POMPANO BCH., FL 33060 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: P () Delete
Name: REILLY, JOSEPH,
Address: 1330 SE 3RD TERRACE
City-St-Zip: POMPANO BCH., FL

Title: T () Delete
Name: TAVARES, EUGENE
Address: 2425 VILLAGE LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: S () Delete
Name: TAVARES, LINDA
Address: 2425 VILLAGE LANE
City-St-Zip: TITUSVILLE, FL 32780

Title: D () Delete
Name: MILLER, BONNIE
Address: 2045 NE 24TH AVE 5
City-St-Zip: POMPANO BEACH, FL 33062

Title: D () Delete
Name: WALSH, ARTHUR
Address: 6322 NW 20 ST
City-St-Zip: MARGATE, FL 33063

Title: D () Delete
Name: ARNESEN, JACK
Address: 424 NORTH RIVERSIDE DRIVE #204
City-St-Zip: POMPANO BEACH, FL 33062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH P. REILLY

PRES

01/12/2007

Electronic Signature of Signing Officer or Director

Date