

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 750747

FILED  
Apr 30, 2009  
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: POMPAN0 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: POMPAN0 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: POMPAN0 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 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

04/30/2009

Electronic Signature of Signing Officer or Director

Date