

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 11, 1996 08:00 AM
Secretary of State

DOCUMENT # 752940 (7)

1. Corporation Name

COCOPLUM HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

**155 ISLA DORADA BLVD
CORAL GABLES FL 33143**

Mailing Address

**155 ISLA DORADA BLVD
CORAL GABLES FL 33143**

3. Date Incorporated or Qualified
06/13/1980

3a. Date of Last Report
04/19/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-2025096

Applied For
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KALICHE, ANTHONY A
6161 BLUE LAGOON DR. #250
WATERFORD CENTER PARK
MIAMI FL 33126**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE
☒ P/D	ROBERTS, H. C	195 CAOBA CT	CORAL GABLES FL	☐
☐ VP/D	HORWITZ, ROBERTO	330 DOLIOS CT	CORAL GABLES FL	☐
☐ TD	CONSE, MARIANNE	130 ROSALES CT	CORAL GABLES FL	☒
☐ SD	BURSTEIN, RHODA	129 ROSALES CT	CORAL GABLES FL	☒
☐ D	ASSERAF, LAURENCE	202 CAOBA CT	CORAL GABLES FL	☐
☐ P/D	SEROLA, ROGER	7166 LAGO DR, E	CORAL GABLES FL	☐

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	DELETE	CHANGE	ADDITION
☐ T/D	Jorge Diaz	9001 SW 68 Terr.	Miami, FL 33143	☐	☐	☒
☐ S/D	Susan Jones	322 Costa Brava	Coral Gables 33143	☐	☐	☒
☐ B	Ben DeMio	7155 Lago Dr. East	Coral Gables FL 33143	☐	☐	☒
☐ D	Delra Frink	133 Rosales	Coral Gables FL 33143	☐	☐	☒
☐ P	Peter Wenzel	180 Palma	Coral Gables 33143	☐	☐	☒
☐				☐	☐	☐
☐				☐	☐	☐

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Roger Serola, President

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/5/96

Date

1111-1384

Daytime Phone #

CR2E037 (12/95)