

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 754320

FILED  
Apr 09, 2012  
Secretary of State

**Entity Name:** COSTA DEL SOL RESORT CONDOMINIUM ASSOCIATION, IN

**Current Principal Place of Business:**

4220 EL MAR DR.  
LAUDERDALE-BY-THE-SEA, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

4220 EL MAR DR.  
LAUDERDALE-BY-THE-SEA, FL 33308

**New Mailing Address:**

**FEI Number:** 59-2231432

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

BECKER & POLIAKOFF, P.A.  
EMERALD LAKE CORP. PARK  
3111 STIRLING ROAD  
FT. LAUDERDALE, FL 333126525 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:** T  
**Name:** SORANNO, VITO  
**Address:** 14 MOUNT PLEASANT RD.  
**City-St-Zip:** MORRISTOWN, NJ 07960

**Title:** D  
**Name:** AYOUB, STEVE  
**Address:** 39A LAKESORE BLVD  
**City-St-Zip:** BEACONFIELD, Q. B., CN H9W 4H6

**Title:** P  
**Name:** CABLE, BARBARA  
**Address:** 4117 S. NORWAY SE  
**City-St-Zip:** GRAND RAPIDS, MI 49546

**Title:** D  
**Name:** GRANDISON, JAYNE  
**Address:** 7009 W. AUGUSTA BLVD  
**City-St-Zip:** YORKTOWN, IN 47396

**Title:** GM  
**Name:** BLASER, CARL F G.M.  
**Address:** 16321 NW 14TH STREET  
**City-St-Zip:** PEMBROKE PINES, FL 33028

**Title:** S  
**Name:** RENAUD, GARY  
**Address:** 51763 WINDING WATERS LANE NORTH  
**City-St-Zip:** ELKHART, IN 46514

I hereby 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 all other like empowered.

**SIGNATURE:** BARBARA CABLE

P

04/09/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date