## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 75597

(7)

LAKE CORONADO ASSOCIATION, INC.

FILED
May 06 1997 8:00am
Secretary of State

Principal Plac	e of Busines	S	М	ailing Address							AU BEBUT BEBUT BI	ITH BABAC FEBA	
3516 CORONADO DR. 5005 W. LAUREL ST. SARASOTA FL 34231 SUITE 206 TAMPA FL 33607-3839													
								3	3. Date Incorporated or Qualified 01/20/1981		ate of Last R 04/10/199		
2. Principal P	lace of Busin	1055	2a.	2a. Mailing Address				4	I. FEI Number	·L	Ar	oplied For	
21)				26					<b>59-2105626</b> Not Applicable				
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5	5. Certificate of Status Desired See Required Fee Required				
City & State				City & State				6	6. Election Campaign Financing \$5.00 May Be				
23			28						Trust Fund Contribution Added to Fees				
Zip		Country		Zip	Cou	ntry	′	8	3. This corporation has liability for in			. 199.032,	
24 25			29					Florida Statutes Yes No					
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
1					:	81	Name						
GORDON, DAVID				:			Street	Address (	Address (P.O. Box Number is Not Acceptable)				
5005 W. LAUREL ST STE 206													
TAMPA FL 33607-3839							•						
						84	City				85 Zip (	Code	
11. Pursuant	to the provisi	ions of Sections 617 050	)2 and 6	17 1508 Florida Stati	itos the at	M	a-named	corporati	on submite this etatement for the pr	FL		to registered	
office or r	egistered ag	ent, or both, in the State	of Flori	da. Such change was	authorized	d by	the cor	poration's	on submits this statement for the pr board of directors. I hereby accep	the app	pointment as	registered	
1	ım tamıyar wi	th and accept the oblig	<del>)2lions d</del>	r, Section 617.0503, F	lorida Stati	utes	\$.						
SIGNATURE .	Signature, typed	or printed name of registered ag-	ent end litte	If applicable /NC	TE Registered	Ane	ent signature	required who	on reinstaling)	DATE			
12.		OFFICERS AN			13.	- Tage	an o gnada	. roquice in a	ADDITIONS/CHANGES TO OFFIC		) DIRECTOR	3S IN 12	
TITLE	PDF			☐ DELETE	1.1 111	LE		D			Change	xixddition	
NAME	GREENB	ERG, STEPHEN			1.2 NA	ME			A STARKER				
STREET ADDRESS 5005 W. LAUREL ST. STE. 20			06	6 1.3 STREET ADDRESS			5005 WEST LAUREL ST, ste 206						
CITY-ST-ZIP TAMPA FL 33607-3839							1.4 CITY-ST-ZIP TA		AMPA, FL 33607				
TITLE	STD			☐ DELETE	2.1 1(1	LE					Change	Addition	
NAME	GORDO	1, DAVID			2.2 NA	ME							
STREET ADDRESS 5005 W. LAUREL ST. STE. 20			06	6 2351			ADDRESS						
CITY-ST-ZIP	_TAMPA I	FL 33607-3839			2.4 CI	TY-8	ST-ZIP						
TITLE	D			XXXELETE	3.1 TIT	LE					Change	Addition	
NAME	ANDERS	ON, NILES			3.2 NA	ME							
STREET ADDRESS	5005 W.	LAUREL ST. STE. 20	06		3.3 ST	REET	ADDRESS						
CITY-ST-ZIP	TAMPA I	FL 33607-3839			3.4. CI	TY-5	ST-ZIP						
TITLE				L DELETE	4.1 1)1	LE					Change	Addition	
NAME					4.2 N/	AME							
STREET ADDRESS					4.3 ST	REET	ADDRESS						
CITY-ST-ZIP				Dr. Fre	4.4 Ci1		T-ZIP						
TITLE				☐ DELETE	5.1 TIT						Change	Addition	
NAME					5. <b>?</b> NA								
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP		<u> </u>		Driette	5.4 CIT		T-ZIP	ļ			<del></del>		
TITLE				DELETE	6.1 TIT						Change	Addition	
NAME					6.2 NA								
STREET ADDRESS					6.3 ST	REET	ADDRESS						

6.1 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 phanged, or on an attachment with an address.