

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 757121

FILED
Apr 06, 2009
Secretary of State

Entity Name: COCONUT PALM CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

1200 S. ROGERS CIRCLE
STE #3
BOCA RATON, FL 33487

New Principal Place of Business:

Current Mailing Address:

1200 S. ROGERS CIRCLE
STE #3
BOCA RATON, FL 33487 US

New Mailing Address:

FEI Number: 59-2588584

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LIPPMAN, KAREN
1200 S ROGERS CIRCLE #3
BOCA RATON, FL 33487 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 () Delete
Name: ROSE, RONALD
Address: 5280 LAS VERDES CIR #109
City-St-Zip: DELRAY BCH., FL 33484

Title: VP () Delete
Name: GOLDMAN, PHYLLIS
Address: 5280 LAS VERDAS CIR #104
City-St-Zip: DELRAY BEACH, FL 33484

Title: D () Delete
Name: POST, TIM
Address: 5280 LAS VERDAS CIRCLE #110
City-St-Zip: DELRAY BEACH, FL 33484

Title: S () Delete
Name: RODKO, THELMA
Address: 5280 LAS VERDAS CIR #217
City-St-Zip: DELRAY BEACH, FL 33484

Title: P () Delete
Name: IRWIN, GERBER
Address: 5280 LAS VERDES CIR., 301
City-St-Zip: DELRAY BEACH, FL 33484

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:

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: IRWIN GERBER

P

04/06/2009

Electronic Signature of Signing Officer or Director

Date