


**2008 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Apr 21, 2008 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # 758306</b> 1. Entity Name COQUINA REEF CONDOMINIUM ASSOCIATION, INC.	
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Principal Place of Business 205 HIGHLAND AVE 877-37TH AVENUE N. BRADENTON BCH, F 34217 US	Mailing Address % PATRICIA B. WILSON 877-37TH AVENUE N. ST. PETERSBURG, FL 33704
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04082008 No Chg-NP CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number 59-2228274	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent  WILSON, PATRICIA B 877-37TH AVENUE N ST. PETERSBURG, FL 33704
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**DO NOT WRITE  
IN THIS SPACE**

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2008**

9. Election Campaign Financing  
Trust Fund Contribution. ☐ **\$5.00 May Be  
Added to Fees**

U000000913180  
05/08/08-80005-024 61.25

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CASO, DIEGO JR 5339 HANSEL AVE. C15 ORLANDO, FL 32809
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD EMMONS, SUSAN 3005 AVALON TER VALRICO, FL 33594
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PARASCHOS, SAM 5122 PERSIMMON TRAIL CLIO, MI 48420
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE  
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

**SIGNATURE:** Diego Caso, Jr.  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/12/2008 (407) 888-3172

Date Daytime Phone #