

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

4 Apr 20, 2006 8:00 am
Secretary of State

04-05-2006 90137 026 ****61.25

DOCUMENT # 760097					
1. Entity Name CORAL SPRINGS VILLAS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business C/O BENCHMARK PROPERTY MGMT 7106 W COMMERCIAL BLVD 4-A FT LAUDERDALE, FL 33319 US			Mailing Address 7932 WILES ROAD CORAL SPRINGS, FL 33067 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-2146481	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent ROBERT KAVE & ASSOCITES P.A. 6261 NW 6 WAY SUITE 103 FORT LAUDERDALE, FL 33309				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when relinquishing) DATE _____					
Filing Fee is \$81.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST BROWN, TRACY 3251 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33071	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	dire to Paul Rocha 3215 Coral Ridge Drive Coral Springs FL 33071	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPO GUILIANO, FRANK 3247 CORAL RIDGE DR. CORAL SPRINGS, FL 33065	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	dire to Darren Tuto 3287 Coral Ridge Drive Coral Springs FL 33071	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALLIEY, JONATHAN 3165 CORAL RIDGE DRIVE CORAL SPRINGS, FL 33065	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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 another like empowered.					
SIGNATURE: <u>Tracy Brown</u>			Date: <u>3/10/06</u>		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date		