


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2008 8:00 am
Secretary of State

05-02-2008 90114 043 ****61.25

DOCUMENT # 760183 1. Entity Name LA COSTA BEACH CLUB RESORT CONDOMINIUM ASSOCIATION, INC.			
Principal Place of Business 1504 N OCEAN BLVD. POMPANO BEACH, FL 33062		Mailing Address 1504 N OCEAN BLVD. POMPANO BEACH, FL 33062	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
4. FEI Number 59-2181495		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent JOHNSON, HENRY WESQ. JOHNSON, ZIPPAY & WALTERS P.A. 1401 N. UNIVERSITY DRIVE, SUITE 301 CORAL SPRINGS, FL 33071		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.		FL Zip Code	
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. <input type="checkbox"/> \$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	PD MALMED, RICHARD 1504 N OCEAN BLVD. POMPANO BCH, FL	TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP WILLIAMS, CLIFFORD 1504 N OCEAN BLVD POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	ST WILLIAMS, CLIFFORD J 1504 N OCEAN BLVD POMPANO BEACH, FL 33062	TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD SCOTT, GREG 1504 N OCEAN BLVD POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MILLER, DANIEL 1504 N OCEAN BLVD POMPANO BEACH, FL 33062
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TITLE NAME STREET ADDRESS CITY - ST - ZIP
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: _____ GREG SCOTT 04-15-08 (321) 453-3300			