

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N03000004612

**FILED**  
**Apr 30, 2004**  
**Secretary of State****Entity Name:** CORAL LAKES OF CAPE CORAL PROPERTY ASSOCIATION, INC.**Current Principal Place of Business:**3300 UNIVERSITY DRIVE  
FIRST FLOOR  
CORAL SPRINGS, FL 33065**New Principal Place of Business:**3300 UNIVERSITY DRIVE  
FIRST FLOOR  
CORAL SPRINGS, FL 33065**Current Mailing Address:**3300 UNIVERSITY DRIVE  
FIRST FLOOR  
CORAL SPRINGS, FL 33065**New Mailing Address:**3300 UNIVERSITY DRIVE  
FIRST FLOOR  
CORAL SPRINGS, FL 33065**FEI Number:****FEI Number Applied For (X)****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JEFFREY A. DEUTCH, P.A.  
7777 GLADES ROAD, SUITE 300  
BOCA RATON, FL 33434 US**Name and Address of New Registered Agent:**DIFIORE, CORA  
3300 UNIVERSITY DRIVE  
SUITE 001  
CORAL SPRINGS, FL 33065 US

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: CORA DIFIORE

04/30/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**Title: STD ( ) Delete  
Name: EVASIUS, JOHN R  
Address: 3300 UNIVERSITY DRIVE FIRST FLOOR  
City-St-Zip: CORAL SPRINGS, FL 33065Title: PD ( ) Delete  
Name: KINSEY, JOHN T  
Address: 3300 UNIVERSITY DRIVE FIRST FLOOR  
City-St-Zip: CORAL SPRINGS, FL 33065Title: VD ( ) Delete  
Name: RABINOWITZ, EVAN J  
Address: 3300 UNIVERSITY DRIVE FIRST FLOOR  
City-St-Zip: CORAL SPRINGS, FL 33065**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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: JOHN EVASIUS

PD

04/30/2004

Electronic Signature of Signing Officer or Director

Date