2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N03000010771

1. Entity Name COCONUT SHORES WEST CONDOMINIUM ASSOCIAITON, INC.



Principal Place of Business C/O P&M PROPERTY MANAGEMENT 15AAA SAN CADLOS BLVD SUITE AO Mailing Address C/O P&M PROPERTY MANAGEMENT

FILED Apr 11, 2007 8:00 am Secretary of State 04-11-2007 90020 042 ****61.25

40056209

FORT MYERS, FL 33908		FORT MYERS, FL 33908								
Principal Place of Business - No P.O. Box # 3.		3. Mailing Address	Mailing Address							
P & M P	roperty Management		& M Property Management		01092007	Chg-NP	CR2E037 (1			
	o. Tamiami Trail, Unit B		360 So. Tamiami Trail, Unit B		4. FEI Numbe 20-0685				Applicable	
Fort My	ers, Florida 33912	Fort Myers, Flo	rida 33912	-	5 Certificate	of Status Desired		75 Addit	tional	
	Name and Address of Current I	Registered Agent	J			Address of New Re	F98	Required		
				-			·giotoi oo / igo.	"		
SAPP, PAU C/O P&M F	JL PROPERTY MANAGEMENT		Str							
15660 SAN	CARLOS BLVD SUITE 40		•			Property Management				
FOR I MYE	ERS, FL 33908					So. Tamiami Trail, Unit B				
				Fort Myers, Florida 33912						
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.										
ino completorio di regionale agoni.										
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE										
	Filing Fee is \$61.25 Due by May 1, 2007		Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		Make check payable to Florida Department of State			
10.	OFFICERS AND DIR		11.	A	DDITIONS/CHA	ANGES TO OFFICER				
TITLE NAME	D HOOLIHAN, THOMAS	Delete	NAME P	Mici	17-1 - F	م حدودی		Change	Addition	
STREET ADDRESS	8001 VINTAGE PARKWAY			3400 i	MORNING	LAKE DR.	UNITZE	7		
CITY-ST-ZIP	FT. MYERS, FL 33912		CITY-ST-ZIP	BONI	TA SPRI	VGS. FL 3				
TITLE	D MARINELLO MARRY	Delete	mu S	ENAU	luce sig	ORDOWARD		Change	Addition	
NAME STREET ADDRESS	MARINELLO, MARK 8001 VINTAGE PARKWAY		STORE ADDRESS	344 11	TORNING LA	TRI BY HIT	-			
CITY-ST-ZIP	FT. MYERS, FL 33912		CITY+ST-ZIP	160 F 1 T	M Sprinzs	F1. 34134	•			
TITLE	D	□ Delete	TITLE T	C.				Change	Addition	
NAME STREET ADDRESS	MCGRATH, JEAN 8001 VINTAGE PARKWAY					FORTUNA INGLAKE DA]	
CITY-ST-ZIP	FT. MYERS, FL 33912			,		NGS, FL39				
TALE	ASM	CX Delete		JAnne	SA.WILL	11tms		Change	Addition	
NAME Street address	LOWMAN, GLYNNIS 15660 SAN CARLOS BLVD SUIT	E 40	NAME STREET ADDRESS	3400	o mornin	4 LAKE DR	2201			
CITY-SI-ZIP	FORT MYERS, FL 33908	L 40	CITY-ST-ZIP	Ban	ITA SPEIN	145, FLA 34	4134			
TITLE		☐ Delete	шт ЛЬ	าเบ	n VINT	OН		Change	⊠ Addition	
NAME			NAME	348	30 MOI	RNING L PRING, F	AKQ #	101		
STREET ADDRESS CITY+ST+ZIP			STREET ADDRESS CITY-ST-ZIP	BON	IITA S	PRING, f	-L 34	134		
MITE		☐ Delete	TITLE	-				Change	Addition	
NAME			NAME					•		
STREET ADDRESS CITY-ST-ZIP			STREET ADDRESS CITY-ST-ZIP							
	ertify that the information supplied with	this filing does not qualify f		ntained	in Chapter 119.	Florida Statutes I f	urther certify #	nat the infi	ormation	
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 Michael Supplement SIGNATURE SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR