

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 23, 2008 8:00 am
Secretary of State

04-23-2008 90037 047 ****61.25

DOCUMENT # N03000010771					
1. Entity Name COCONUT SHORES WEST CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business P&M PROPERTY MANAGEMENT 14360 SO. TAMiami TRAIL UNIT B FORT MYERS, FL 33912			Mailing Address P&M PROPERTY MANAGEMENT 14360 SO. TAMiami TRAIL UNIT B FORT MYERS, FL 33912		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 20-0685752	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SAPP, PAUL P&M PROPERTY MANAGEMENT 14360 SO. TAMiami TRAIL UNIT B FORT MYERS, FL 33912			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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.)</small>					
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	P PELLETIER, MICHAEL T <input checked="" type="checkbox"/> Delete 3400 MORNING LAKE DR. UNIT 202 BONITA SPRINGS, FL 34134	TITLE NAME STREET ADDRESS CITY-ST- ZIP	D MIKE PELLETIER <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3400 MORNING LAKE #202 BONITA SPRINGS, FL 34134		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	S BORDONARO, EMANUEL J <input checked="" type="checkbox"/> Delete 3411 MORNING LAKE DR. #112 BONITA SPRINGS, FL 34134	TITLE NAME STREET ADDRESS CITY-ST- ZIP	V CARL BREIER <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 3411 MORNING LAKE #201 BONITA SPRING, FL 34134		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	T FORTUNA, GRACE M <input type="checkbox"/> Delete 3510 MORNINGLAKE DR #101 BONITA SPRINGS, FL 34134	TITLE NAME STREET ADDRESS CITY-ST- ZIP	S/T GRACE FORTUNA <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3510 MORNING LAKE #101 BONITA SPRINGS, FL 34134		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D WILLIAMS, JAMES A <input type="checkbox"/> Delete 3400 MORNING LAKE DR #201 BONITA SPRINGS, FL 34134	TITLE NAME STREET ADDRESS CITY-ST- ZIP	P JAMES WILLIAMS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3400 MORNING LAKE #201 BONITA SPRINGS, FL 34134		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	V VINTON, JIM <input type="checkbox"/> Delete 3480 MORNING LAKE DR. #101 BONITA SPRINGS, FL 34134	TITLE NAME STREET ADDRESS CITY-ST- ZIP	D JIM VINTON <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 3480 MORNING LAKE #101 BONITA SPRINGS, FL 34134		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.					
SIGNATURE: <u>James A. Williams</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			3/31/08 <small>Date Daytime Phone #</small>		