2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007432

FILED Jan 19, 2009 Secretary of State

Entity Name: CORAL VILLAGE CONDOMINIUM ASSOCIATION, INC. **Current Principal Place of Business: New Principal Place of Business:** C/O J & L PROPERTY MANAGEMENT 10191 W SAMPLE RD, SUITE #203 CORAL SPRINGS, FL 33065 **New Mailing Address: Current Mailing Address:** C/O J & L PROPERTY MANAGEMENT 10191 W SAMPLE RD, SUITE #203 CORAL SPRINGS, FL 33065 FEI Number: 20-2240673 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: CALDERAZZO, JAMES CALDERAZZO, JAMES % J& L PROPÉRTY MGMT. INC % J & L PROPÉRTY MGMT. INC 10191 WEST SAMPLE RD., SUITE #203 10191 WEST SAMPLE RD SUITE #203 CORAL SPRINGS, FL 33065 US 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: 01/19/2009 Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition QUOWANDA, FORD Name: Name: 11460 NW 43 ST Address: Address: City-St-Zip: CORAL SPRINGS, FL 33065 City-St-Zip: Title: () Delete Title: (X) Change () Addition Name: HODGES, RUTHMARIE Name: HODGES, RUTHMARIE Address: 11467 NW 42ND ST Address: 11467 NW 42ND ST City-St-Zip: POMPANO BEACH, FL 33065 City-St-Zip: POMPANO BEACH, FL 33065 Title: () Delete Title: (X) Change () Addition PARKER, SUSAN PARKER, SUSAN Name: Name: 11488 NW 43RD ST Address: Address: 11488 NW 43RD ST City-St-Zip: POMPANO BEACH, FL 33065 City-St-Zip: POMPANO BEACH, FL 33065 () Delete Title: Title: () Change () Addition EIDA, MAX Name: Name: 10542 LA REINA RD Address: Address: City-St-Zip: DELRAY, FL 33446 City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: JAMES CALDERAZZO RA 01/19/2009