


**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 15, 2006 8:00 am**  
**Secretary of State**

02-15-2006 90039 018 \*\*\*\*61.25

**DOCUMENT # N04000008522**  
 1. Entity Name  
 CORAL VILLAS ASSOCIATION, INC.



Principal Place of Business *300* Mailing Address *300*  
 2715 E OAKLAND PARK BLVD SUITE 201  
 FT LAUDERDALE, FL 33306

60016133



**DO NOT WRITE IN THIS SPACE**

01122006 No Chg-NP CR2E037 (11/05)

4. FEI Number  
 20-1621944 Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
 GALLERIA ASSET MANAGEMENT CORP  
 2715 E OAKLAND PARK BLVD SUITE 201 *300*  
 FT LAUDERDALE, FL 33306

**DO NOT WRITE IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

**Filing Fee is \$61.25**  
**Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP SENESI, FRED P 2715 E OAKLAND PARK BLVD SUITE 201 <i>300</i> FT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV LESOUSKY, JOHN 2715 E OAKLAND PARK BLVD SUITE 201 FT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DST LESOUSKY, DAVID 2715 E OAKLAND PARK BLVD SUITE 201 FT LAUDERDALE, FL 33306
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE IN THIS SPACE**

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: Fred Senesi *11/31/06* *957-518-9485*  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #