

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 27, 2006 8:00 am
Secretary of State

02-27-2006 90100 049 ****61.25

DOCUMENT # N04839

1. Entity Name

CORAL SANDS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

1525 S. ATLANTIC AVE.
P O BOX 191
COCOA BEACH FL 32931

Mailing Address

1525 S. ATLANTIC AVE.
P O BOX 191
COCOA BEACH FL 32931

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2313353

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RIGERMAN, MARILYN A
200 N. 1ST STREET
COCOA BEACH FL 32831

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$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 DP ☐ Delete
NAME ALEXANDER, JOHN
STREET ADDRESS 1527 S ATLANTIC AVE # 401
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Delete
NAME CHERRY, RICHARD
STREET ADDRESS 1527 S ATLANTIC AVE # 201
CITY-ST-ZIP COCOA BCH FL 32931

TITLE ☐ Change ☒ Addition
NAME Tully, Paul
STREET ADDRESS 26 Fairway Drive
CITY-ST-ZIP Cocoa Beach, Fl 32931

TITLE D ☒ Delete
NAME DUNLAP, SUNDRA
STREET ADDRESS 1527 S ATLANTIC AVE #
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Change ☒ Addition
NAME O
STREET ADDRESS Marcus, Andy
CITY-ST-ZIP 3606 Bellington Drive
Orlando, Fl 32835

TITLE SD ☐ Delete
NAME TRAPWELL, TERESA
STREET ADDRESS 1527 S ATLANTIC AVE # 501
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME LEBLEU, JIM
STREET ADDRESS 1525 S. ATLANTIC AVE.
CITY-ST-ZIP COCOA BEACH FL 32931

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

President John J. Alexander

2/2/06

(321) 783-8333