

# **2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N05000002579

**FILED**  
**Apr 26, 2011**  
**Secretary of State**

**Entity Name:** CORAL BAY VILLAGE CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

603 S.E. 13TH STREET  
CAPE CORAL, FL 33904

**New Principal Place of Business:**

**Current Mailing Address:**

1320 ABINGTON CAMBS  
LAKE FOREST, IL 60045

**New Mailing Address:**

**FEI Number:** 20-8214068

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ROLLINGS, HARVEY  
1633 S.E. 4TH TERRACE  
CAPE CORAL, FL 33904 US

**Name and Address of New Registered Agent:**

CIRRINCIONE, THOMAS  
5797 HARBOUR CIRCLE  
CAPE CORAL, FL 33914 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:** THOMAS CIRRINCIONE

04/26/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

**Title:** D  
**Name:** CIRRINCIONE, THOMAS  
**Address:** 1320 WEST ABINGTON CAMBS  
**City-St-Zip:** LAKE FOREST, IL 60045

**Title:** D  
**Name:** CIRRINCIONE, SAMUEL  
**Address:** 1320 WEST ABINGTON CAMBS  
**City-St-Zip:** LAKE FOREST, IL 60045

**Title:** D  
**Name:** ROLLINGS, HARVEY  
**Address:** 1633 S.E. 47TH TERRACE  
**City-St-Zip:** CAPE CORAL, FL 33904

I hereby 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 all other like empowered.

**SIGNATURE:** THOMAS CIRRINCIONE

MGRM

04/26/2011

Electronic Signature of Signing Officer or Director

Date