


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2008 8:00 am
Secretary of State

04-30-2008 90176 043 ****61.25

DOCUMENT # N06000002601	
1. Entity Name COCONUT VILLAS OF REDINGTON SHORES CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 17505 GULF BOULEVARD REDINGTON SHORES, FL 33708	Mailing Address C/O CANDOS BY SIRATA 18131 GULF BLVD STE CC REDINGTON SHORES, FL 33708
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60033082

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



01292008 Chg-NP CR2E037 (12/06)

4. FEI Number 20-4448477		Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent ARSENAULT, KENNETH G JR. 10225 ULMERTON ROAD SUITE 2 LARGO, FL 33771		7. Name and Address of New Registered Agent Name <u>Candos by Sirata</u> Street Address (P.O. Box Number is Not Acceptable) <u>18131 Gulf Blvd Suite BB</u> City <u>Redington Shores FL</u> Zip Code <u>33708</u>

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 Jason M Wilson DATE 4/28/08

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

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
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD IRESON, SAMUEL B 17505 GULF BOULEVARD REDINGTON SHORES, FL 33708 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Roderick Jones 136 175th Ave E. Redington Shores FL 33708
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD IRESON, FLORENCE A 17505 GULF BOULEVARD REDINGTON SHORES, FL 33708 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Matthew Gordon 5610 Seagrass PL Apollo Beach FL 33572
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD IRESON, JASON 17505 GULF BOULEVARD REDINGTON SHORES, FL 33708 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Rose Bass 13823 John Casson Ave Hudson FL 34667
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
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
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: [Signature] DATE 28 APRIL 2008 DAYTIME PHONE # 727-368-2442

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR