

# 2011 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N07000005549

FILED  
Apr 03, 2011  
Secretary of State

**Entity Name:** CORAL VISTA CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

GULF SHORE CAM INC.  
76 PONDELLA ROAD, SUITE 201  
N. FORT MYERS, FL 33903

**New Principal Place of Business:**

**Current Mailing Address:**

GULF SHORE CAM INC.  
76 PONDELLA ROAD, SUITE 201  
N. FORT MYERS, FL 33903

**New Mailing Address:**

**FEI Number:**                      **FEI Number Applied For ( )**                      **FEI Number Not Applicable (X)**                      **Certificate of Status Desired ( )**

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

LAPOSTA, RICHARD L  
76 PONDELLA RD., SUITE 201  
(GULF SHORES C.A.M., INC.)  
N. FT. MYERS, FL 33903 US

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

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: DP  
Name: DEROV, RON  
Address: 1209-2 DIPLOMAT PKWY.  
City-St-Zip: CAPE CORAL, FL 33990

Title: DST  
Name: PEREZ, CARMEN  
Address: 1209-1 DIPLOMAT PKWY.  
City-St-Zip: CAPE CORAL, FL 33990

Title: DVP  
Name: SANCHEZ, FRANKLIN  
Address: 1209-4 DIPLOMAT PKWY.  
City-St-Zip: CAPE CORAL, FL 33990

Title: D  
Name: WARD, CHRISTOPHER  
Address: 1209-3 DIPLOMAT PKWY.  
City-St-Zip: CAPE CORAL, FL 33990

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: RON DEROV

DP

04/03/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date