2004 CORPORATION ANNUAL REPORT (AR)

FILED
Feb 17, 2004 8:00 am
Secretary of State
02-17-2004 90039 049 ***150.00

DOCUMENT # N07000007240

1. Entity Name

CORONADO ESTATES OF BOYNTON BEACH HOMEOWNERS ASSOCIATION, INC.

94016052

Principal Place of Business	Mailing Address
5476 GRANDE PALM CIR. DELRAY BEACH FL 33484	~~GREENLIFE PROP MGMT~~ ~~5500 NW 2ND AVE (OFC)~~ ~~BOCA RATON FL 33487~~

MOORE CR2E034 (11/03)

2. Principal Place of Business	3. Mailing Address
5783 Coronado Lake Blvd	Greenlite Prop Mgmt
Suite, Apt. #, etc.	Suite, Apt. #, etc. 12 Tam O' Shanter Lane
City & State Boynton Bch Fla	City & State Boca Raton Fla
Zip 33437 Country Palm Bch	Zip 33431 Country Palm Bch

4. FEI Number 65-0978853 ☐ 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
GREENLITE PROP MGMT. 5500 NW 2ND AVE (OFFICE) BOCA RATON FL 33487	Name: Greenlite Prop Mgmt Street Address (P.O. Box Number is Not Acceptable): 12 Tam O' Shanter Lane Boca Raton City: Boca Raton FL Zip Code: 33431

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: John M Bellofatto John H. Bellofatto 2/11/04
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS $150.00
After May 1, 2004 Fee will be $550.00
Make Check Payable to Florida Department of State

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

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ANDEN, JERRY 5476 GRANDE PALM CIR. DELRAY BEACH FL 33484	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BELLOYATTO, JOHN M 5500 NW 2ND AVE. BOCA RATON FL 33487	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Bellofatto John H. 12 Tam O' Shanter lane Boca Raton Fla 33431 ☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MASSEY, KATHLEEN 5476 GRANDE PALM CIR. DELRAY BEACH FL 33484	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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: John M Bellofatto John H. Bellofatto 2/11/04 561-239-8309
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #