## 2007 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

## DOCUMENT # N07000007240 1. Entity Name CORÓNADO ESTATES OF BOYNTON BEACH 07 JUL 30 11 8: 34 HOMEOWNERS ASSOCIATION, INC. WILL ALL FLORIDA Principal Place of Business Mailing Address %QUALITY MGMT GROUP INC. 9707 CORONADO LAKE DR **BOYNTON BEACH, FL 33437** P.O. BOX 970878 BOCA RATON, FL 33497 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 07242007 Chq-NP CR2E037 (12/06) City & State City & State 4. FEI Number Applied For 65-0978853 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name GLICKMAN, LARRY Z ESQ Street Address (P.O. Box Number is Not Acceptable) 301 YAMATO ROAD., SUITE 4150 BOCA RATON, FL 33431 City 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. DATE (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to \$5.00 May Be Amended AR is \$61.25 Florida Department of State Trust Fund Contribution. Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE Addition ANDEN, JERRY NAME NAME STREET ADDRESS 5476 GRANDE PALM CIR STREET ADDRESS CITY-ST-ZIP CITY+ST-7IP DELRAY BEACH, FL 33484 Delete TITLE TITLE NAME CLAXTON, PHILIP NAME 9725 CORONADO LAKE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33437 CITY-ST-ZIP ☐ Delete TITLE TITLE RAUCH, CHRISTOPHER NAME NAME 9743 CORONADO LAKE DR STREET ADORESS STREET ADDRESS CITY-\$T-ZIP BOYNTON BEACH, FL 33437 CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE COSENTINO, PAUL NAME NAME 9893 CORNADO LAKE DR STREET ADDRESS STREET ADDRESS CITY-ST-ZIP BOYNTON BEACH, FL 33437 CITY+ST-ZIP TITLE ☐ Delete TITLE Change Addition SCHIAVINATO, REINALDO NAME NAME STREET ADDRESS 9719 CORONADO LAKE DR STREET ADDRESS CITY-ST-ZiP BOYNTON BEACH, FL 33437 CITY-ST-ZIP Change Addition TITLE ☐ Delete TITLE REITER, SUSAN NAME NAME 9730 CORONADO LAKE DR STREET ADDRESS STREET ADDRESS BOYNTON BEACH, FL 33437 CITY-ST-ZIP 12. I hereby certify that the information subplied with this filling 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 for trustee employee'd 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:

Daytime Phone #