


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 06, 2005 8:00 am
Secretary of State

05-06-2005 90090 005 ****61.25

DOCUMENT # N19896 1. Entity Name COSTA NORTE HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 2580 SYKES CREEK DRIVE MERRITT ISLAND, FL 32953			Mailing Address 2580 SYKES CREEK DRIVE MERRITT ISLAND, FL 32953		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 59-2870379	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent CATALANO, JOE 2588 SYKES CREEK DRIVE MERRITT ISLAND, FL 32953				7. Name and Address of New Registered Agent Name MAKIE KATZ Street Address (P.O. Box Number is Not Acceptable) 2581 Sykes Creek Drive City Merritt Island FL Zip Code 32953	
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 MAKIE KATZ <i>Marcie Katz</i> 4/28/2005 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering) DATE</small>					
Filing Fee is \$61.25 Due by September 7, 2005		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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TAYLOR, PAT 2567 SYKES CREEK DRIVE MERRITT ISLAND, FL 32953	<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	President Kristen Becker 2566 Sykes Creek Drive Merritt Island, FL 32953
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD CATALANO, JOE 2588 SYKES CREEK DRIVE MERRITT ISLAND, FL 32953		<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP Treasurer MARCIE KATZ 2581 Sykes Creek Drive Merritt Island, FL 32953	
TITLE NAME STREET ADDRESS CITY-ST-ZIP SD LABUDA, ELLIE 2583 SYKES CREEK DRIVE MERRITT ISLAND, FL 32953		<input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP Secretary Gwen Catalano 2588 Sykes Creek Drive Merritt Island, FL 32953	
TITLE NAME STREET ADDRESS CITY-ST-ZIP VD POVILAITIS, ROELOFJE 2569 SYKES CREEK DRIVE MERRITT ISLAND, FL 32953		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	
TITLE NAME STREET ADDRESS CITY-ST-ZIP 		<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP 	
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 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: MAKIE KATZ <i>Marcie Katz</i> 4/28/2005 321 452 1998 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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05022005 Chg-NP CR2E037 (10/03)