

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20076

FILED
Apr 03, 2009
Secretary of State

Entity Name: CORAL RIDGE ISLES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O BUNNEY BRENNEMAN
1700 NE 52ND ST
FORT LAUDERDALE, FL 33334 US

New Principal Place of Business:

Current Mailing Address:

P. O. BOX 70403
FT. LAUDERDALE, FL 33307 US

New Mailing Address:

FEI Number: 65-0002387 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BEAMER, WILLIAM D
1975 E. SUNRISE BLVD.
FORT LAUDERDALE, FL 33304 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: RS () Delete
Name: MURPHY, LORETTA
Address: 1460 NE 56TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33334

Title: DV () Delete
Name: HANDLEY, JACK
Address: 1600 NE 56 ST. #2
City-St-Zip: FT LAUDERDALE, FL 33334

Title: CS () Delete
Name: MURPHY, KATHLEEN
Address: 1466 NE 56TH STREET
City-St-Zip: FT. LAUDERDALE, FL 33334

Title: D () Delete
Name: VENNE, BILL
Address: 1469 NE 53RD STREET
City-St-Zip: FT. LAUDERDALE, FL 33334

Title: PD () Delete
Name: BRENNEMAN, BUNNEY
Address: 1700 N.E. 52ND ST
City-St-Zip: FT LAUDERDALE, FL 33334

Title: T () Delete
Name: BAILLE, CAROL
Address: 1500 NE 51ST STREET
City-St-Zip: FT. LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: T (X) Change () Addition
Name: BAILLIE, CAROL
Address: 1500 NE 51ST STREET
City-St-Zip: FT. LAUDERDALE, FL 33334

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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 an address, with all other like empowered.

SIGNATURE: CAROL BAILLIE

Electronic Signature of Signing Officer or Director

T

04/03/2009

Date