

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N26983

FILED
Mar 23, 2009
Secretary of State

Entity Name: COCONUT GROVE PARK HOMEOWNERS ASSOCIATION INCORPORATED

Current Principal Place of Business:

3055 WASHINGTON STREET
COCONUT GROVE, FL 33133

New Principal Place of Business:

Current Mailing Address:

3055 WASHINGTON STREET
COCONUT GROVE, FL 33133

New Mailing Address:

FEI Number: 65-0067358

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LEWIS, ARTHUR E ESQ.
2491 SW 27TH LANE
COCONUT GROVE, FL 33133 US

Name and Address of New Registered Agent:

FREED, MARIA B
3055 WASHINGTON STREET
COCONUT GROVE, FL 33133 US

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: MARIA B FREED

03/23/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: FREED, MARIA
Address: 3055 WASHINGTON STREET
City-St-Zip: COCONUT GROVE, FL 33133

Title: VD () Delete
Name: LEWIS, ARTHUR E
Address: 2491 SW 27TH LANE
City-St-Zip: COCONUT GROVE, FL 33133

Title: SD () Delete
Name: SORG, STUART
Address: 3091 LUCAYA STREET
City-St-Zip: COCONUT GROVE, FL 33133

Title: TD () Delete
Name: CARTER, GRACE
Address: 2528 ABACO AVENUE
City-St-Zip: COCONUT GROVE, FL 33133

Title: D () Delete
Name: WILLIAMS, HADLEY C
Address: 2441 TRAPP AVENUE
City-St-Zip: COCONUT GROVE, FL 33133

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: FREED, MARIA B
Address: 3055 WASHINGTON STREET
City-St-Zip: COCONUT GROVE, FL 33133

Title: VP (X) Change () Addition
Name: SHELLEY, CYNTHIA
Address: 2975 WASHINGTON STREET
City-St-Zip: COCONUT GROVE, FL 33133

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

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

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

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: MARIA B FREED

PRES

03/23/2009

Electronic Signature of Signing Officer or Director

Date