

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90126 003 ****61.25

14015698



02092005 Chg-NP CR2E037 (10/03)

DOCUMENT # N28334 1. Entity Name CORAL SEAS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 6770 RIDGEWOOD AVENUE COCOA BEACH, FL 32931			Mailing Address 6770 RIDGEWOOD AVENUE COCOA BEACH, FL 32931		
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 65-0071909			Applied For <input type="checkbox"/> Not Applicable		
5. Certificate of Status Desired <input type="checkbox"/>			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent SPACE COAST PROPERTY MANGMENT 1617 COOLING AVE MELBOURNE, FL 32935			7. Name and Address of New Registered Agent Name _____ Street Address (P.O. Box Number is Not Acceptable) _____ City _____ FL 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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reissuing) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 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					
TITLE	TDS <input checked="" type="checkbox"/> Delete				
NAME	GRIFFIN, STEVE				
STREET ADDRESS	6770 RIDGEWOOD AVE. #201				
CITY-ST-ZIP	COCOA BEACH, FL 32931				
TITLE	PD <input type="checkbox"/> Delete				
NAME	SIMMONS, DOUG				
STREET ADDRESS	6770 RIDGEWOOD AVE. #202				
CITY-ST-ZIP	COCOA BEACH, FL 32931				
TITLE	D <input type="checkbox"/> Delete				
NAME	LUPKAS, JACK				
STREET ADDRESS	6770 RIDGEWOOD AVE. #1102				
CITY-ST-ZIP	COCOA BEACH, FL 32931				
TITLE	D <input type="checkbox"/> Delete				
NAME	CARTER, KEITH				
STREET ADDRESS	6770 RIDGEWOOD AVE. #601				
CITY-ST-ZIP	COCOA BEACH, FL 32931				
TITLE	VPD <input checked="" type="checkbox"/> Delete				
NAME	O'BRIEN, MARGE				
STREET ADDRESS	6770 RIDGEWOOD AVE. #803				
CITY-ST-ZIP	COCOA BEACH, FL 32931				
TITLE	<input type="checkbox"/> Delete				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE	TDS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition				
NAME	PENROB, DANE				
STREET ADDRESS	6770 RIDGEWOOD #801				
CITY-ST-ZIP	COCOA BEACH FL 32931				
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME					
STREET ADDRESS					
CITY-ST-ZIP					
TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition				
NAME	HEROLD, CHARLIE				
STREET ADDRESS	6770 RIDGEWOOD				
CITY-ST-ZIP	COCOA BEACH, FL 32931				
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition				
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: <i>Douglas A. Simmons</i> DOUGLAS A. SIMMONS <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					
4/2/05 321-783-2794 <small>Date Daytime Phone #</small>					