

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28334

FILED
Apr 30, 2009
Secretary of State

Entity Name: CORAL SEAS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6770 RIDGEWOOD AVENUE
COCOA BEACH, FL 32931

New Principal Place of Business:

Current Mailing Address:

6770 RIDGEWOOD AVENUE
COCOA BEACH, FL 32931

New Mailing Address:

FEI Number: 65-0071909

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SPACE COAST PROPERTY MANGMENT
645 CLASSIC CT
SUITE 104
MELBOURNE, FL 32940 US

Name and Address of New Registered Agent:

KEYS PROPERTY MANAGEMENT ENTERPRISE, INC.
5505 N. ATLANTIC AVENUE
SUITE 207
COCOA BEACH, FL 32931 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: JEANINE TANZ

04/30/2009

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VP () Delete
Name: SIMMONS, DOUG
Address: 6770 RIDGEWOOD AVE. #202
City-St-Zip: COCOA BEACH, FL 32931

Title: P () Delete
Name: O'BRIEN, BILL
Address: 6770 RIDGEWOOD AVE #803
City-St-Zip: COCOA BEACH, FL 32931

Title: D () Delete
Name: SCHMIDT, HAROLD
Address: 6770 RIDGEWOOD AVE #704
City-St-Zip: COCOA BEACH, FL 32931

Title: T () Delete
Name: KEENAN, VINCE
Address: 6770 RIDGEWOOD AVE #1104
City-St-Zip: COCOA BEACH, FL 32931

Title: S () Delete
Name: WEIGER, PAM
Address: 6770 RIDGEWOOD AVE #902
City-St-Zip: COCOA BEACH, FL 32931

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:

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: WILLIAM O'BRIEN

P

04/30/2009

Electronic Signature of Signing Officer or Director

Date