


FILE NOW: FILING FEE IS \$61.25

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**Feb 03 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N28366 (5)
1. Corporation Name
COCONUT COVE OF LANTANA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 189 BRADLEY PLACE PALM BEACH FL 33480	Mailing Address 189 BRADLEY PLACE PALM BEACH FL 33480
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3. Date Incorporated or Qualified
09/15/1988

4. FEI Number 65-0138941	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>
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2. Principal Place of Business 21 2875 S. OCEAN BLVD. Suite, Apt. #, etc. 22 # 200 City & State 23 PALM BEACH FL Zip 24 33480	2a. Mailing Address 26 2875 S. OCEAN BLVD. Suite, Apt. #, etc. 27 # 200 City & State 28 PALM BEACH FL Zip 29 33480	Country 25 USA	Country 30 USA
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5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution **\$5.00** May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent
BOSWELL, DON R
189 BRADLEY PLACE
PALM BEACH FL 33480

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	2875 S. OCEAN BLVD. #200
83	
84 City	FL
85 Zip Code	

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	BOSWELL, DON R.	
STREET ADDRESS	189 BRADLEY PLACE	
CITY-ST-ZIP	PALM BCH. FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	GRAHAM, WILLIAM	
STREET ADDRESS	832 OYSTER LANE	
CITY-ST-ZIP	LANTANA FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	MCGILL, JEANETTE M.	
STREET ADDRESS	314 NORTH LAKE DR.	
CITY-ST-ZIP	LANTANA FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	DICKOW, MARK	
STREET ADDRESS	20411 W. TWELVE MILE RD.	
CITY-ST-ZIP	SOUTHFIELD MI	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DELSON, MELISSA	
STREET ADDRESS	322 N. LAKE DR.	
CITY-ST-ZIP	LANTANA FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	DITZIG, LINDA D.	
STREET ADDRESS	2167-B MOUNT PARAN RD., N.W.	
CITY-ST-ZIP	ATLANTA GA	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	2875 S. OCEAN BLVD. #200
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. 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 annual report or supplemental annual 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 12 or Block 13 if changed, or in an attachment with an address.

SIGNATURE: *Don R. Boswell* President 1-15-97 561837860

CR2E037 (10/97)