

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 30, 2006 08:00 AM
Secretary of State

DOCUMENT # N28366

1. Entity Name
**COCONUT COVE OF LANTANA CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

**2875 S. OCEAN BLVD.
#200
PALM BEACH, FL 33480 US**

Mailing Address

**2875 S. OCEAN BLVD
#200
PALM BEACH, FL 33480 US**



01252006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

| | |
|---|-------------------------------|
| 4. FEI Number 65-0138941 | Applied For Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | |

6. Name and Address of Current Registered Agent

**BOSWELL, DON R
2875 S. OCEAN BLVD. #200
PALM BEACH, FL 33480**

**DO NOT WRITE
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

| | |
|-----------------|--------------------------|
| TITLE | DP |
| NAME | BOSWELL, DON R. |
| STREET ADDRESS | 2875 S. OCEAN BLVD. #200 |
| CITY - ST - ZIP | PALM BEACH, FL 33480 |

| | |
|-----------------|----------------------|
| TITLE | D |
| NAME | MONTGOMERY, DEREK |
| STREET ADDRESS | 318 N LAKE DR |
| CITY - ST - ZIP | LAKE WORTH, FL 33462 |

| | |
|-----------------|----------------------|
| TITLE | DS |
| NAME | BOLSSON, CLAUDE Y |
| STREET ADDRESS | 332 N. LAKE DRIVE |
| CITY - ST - ZIP | PALM BEACH, FL 33480 |

| | |
|-----------------|-------------------|
| TITLE | DVP |
| NAME | CONTERAS, ELENA C |
| STREET ADDRESS | 320 N. LAKE DRIVE |
| CITY - ST - ZIP | LANTANA, FL 33462 |

| | |
|-----------------|-------------------|
| TITLE | D |
| NAME | ECKLER, WM |
| STREET ADDRESS | 326 N LAKE DR |
| CITY - ST - ZIP | LANTANA, FL 33462 |

| | |
|-----------------|----------------------|
| TITLE | D |
| NAME | BARACHMAN, KEN |
| STREET ADDRESS | 328 N LAKE DRIVE |
| CITY - ST - ZIP | LAKE WORTH, FL 33462 |

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02/07/06-80106-017 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

1-25-2006 561.547.6300