

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N28366

FILED
Apr 24, 2009
Secretary of State

Entity Name: COCONUT COVE OF LANTANA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

334 NORTH LAKE DRIVE
LANTANA, FL 33462 US

New Principal Place of Business:

Current Mailing Address:

334 NORTH LAKE DRIVE
LANTANA, FL 33462 US

New Mailing Address:

FEI Number: 65-0138941

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOSWELL, DON R
1601 BELVEDERE RD
SUITE 106-E
WEST PALM BEACH, FL 33406 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BOSWELL, DON R.
Address: 1601 BELVEDERE ROAD, SUITE 106-E
City-St-Zip: WEST PALM BEACH, FL 33406

Title: DVP () Delete
Name: CONTRERAS, ELENA
Address: 320 NORTH LAKE DR.
City-St-Zip: LANTANA, FL 33462

Title: S/T () Delete
Name: RASCH, LOIS Y
Address: 332 N. LAKE DRIVE
City-St-Zip: LANTANA, FL 33462

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: BOSWELL, DON R
Address: 1601 BELVEDERE ROAD, SUITE 106-E
City-St-Zip: WEST PALM BEACH, FL 33406

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: DON R. BOSWELL

PD

04/24/2009

Electronic Signature of Signing Officer or Director

_____ Date