

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Aug 02, 2005 8:00 am
Secretary of State

02-28-2005 90199 041 ****61.25

DOCUMENT# N36299

1. Entity Name
 THE COCOA BEACH AREA HOTEL AND MOTEL ASSOCIATION, INC.



Principal Place of Business C/O BRUCE D. SONNENBERG 5600 N. ATLANTIC AVE COCOA BEACH, FL 32931	Mailing Address C/O BRUCE D. SONNENBERG 5600 N. ATLANTIC AVE COCOA BEACH, FL 32931
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07222005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-3048626	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

SONNENBERG, BRUCE D
 5600 N. ATLANTIC AVE
 COCOA BEACH, FL 32931

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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: *Debra Green* *Debra Green only as President COMAT 7/27/05*
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 September 7, 2005

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

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP GREEN, DEBRA 1550 N. ATLANTIC AVE. COCOA BCH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SPAIN, DAVID W 3901 N. ATLANTIC AVE. COCOA BCH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S WILLIAMSON, THOMAS C 3428 N. ATLANTIC AVE. COCOA BEACH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T SONNENBERG, BRUCE D 5500 N. ATLANTIC AVE. COCOA BEACH, FL 32931
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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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: *Debra Green* *7-27-05*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

ATTACHMENT

66025317

N36299

Florida Department of State
Division of Corporations
PO Box. 6327
Tallahassee, FL. 32314

22 July 2005

The Cocoa Beach Area Hotel and Motel Association, Inc.
976 Brevard Ave.
Rockledge, Fl. 32955

To Whom it may Concern,

Please find included with this cover the Annual Report for 2005. The original was submitted on time with a check for the amount of \$61.25 (check # 1017 cashed 02-28-05). Unfortunately the original report had an error and was returned but got lost somewhere in between. Please accept this corrected report and keep the corporation active. If there is anything further we need to do to complete this task please do not hesitate to contact us.

Sincerely,



DEBRA GREEN only as President of
The Cocoa Beach Area Hotel and Motel Association, Inc