## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 26, 2007 8:00 am Secretary of State

1. Entity Name THE COCOA BEACH AREA HOTEL AND MOTEL ASSOCIATION, INC.  Principal Place of Business C/O BRUCE D. SONNENBERG S600 N. ATLANTIC AVE COCOA BEACH, FL 32931  2. Principal Place of Business - No P.O. Box # 9.76 Brevard Ave Suite, Apt. #, etc.  City & State BOCK   FOR	Country & State  Country  Coun	1. Entity Nam	MENT # NIGGOOD							
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  2. Principal Place of Business - No P.O. Box # 976 Brevard Ave Suite, Apt. #, etc.  City & State FOCK FOR STATE FOR STA	HE COCOA BEACH AREA HOTEL AND MOTEL  SSOCIATION, INC.  Mailing Address  O BRUCE D. SONNENBERG  O BRUCE D. SONNENBERG  SOO N. ATLANTIC AVE  SOO N. ATLANTIC AVE  COCOA BEACH, FL 32931  Principal Place of Business - No P.O. Box #  9 76 Brevarb Ave  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  O CIC Ledge  FI  Country  3 2955  Country  3 2955  Country  3 2955  Country  3 2955  Country  Suite Agent  Applied For  Social Place of Status Desired  \$8.75 Additional Fee Required  7. Name and Address of New Registered Agent  Name	THE COC	1. Entity Name				Secretary of State 04-26-2007 90232 007 ****61.25			
C/O BRUCE D. SONNENBERG 5600 N. ATLANTIC AVE COCOA BEACH, FL 32931  2. Principal Place of Business - No P.O. Box # 3. Mailing Address 976 Brevard Ave 976 Brevard D Ave Suite, Apt. #, etc.  City & State POCK   Edge Fl   City & State Rock   Edge Fl   Country 32955   US # 32955   US # 32955   US # 32955   US # 5. Name and Address of Current Registered Agent  SONNENBERG, BRUCE D 5600 N. ATLANTIC AVE  City & State Pock   Applied Fr   Country   Country   Street Address (P.O. Box Number is Not Acceptable)	O BRUCE D. SONNENBERG SOO N. ATLANTIC AVE SOON ATLANTIC AVE COCOA BEACH, FL 32931  Principal Place of Business - No P.O. Box #  9 76 Brevar Ave Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State Cocontry 3 2955  Country 3 2955  Country 3 2955  Country 3 2955  Country Country 3 2955  Country Countr	1.000017	OA BEACH AREA HOTEL	AND MOTEL						
5600 N. ATLANTIC AVE COCOA BEACH, FL 32931  2. Principal Place of Business - No P.O. Box # 976 Brevia to Ave Suite, Apt. #, etc.  City & State Rock   South	Solo N. ATLANTIC AVE COCOA BEACH, FL 32931  Principal Place of Business - No P.O. Box # 3. Mailing Address 976 Brevard Dave Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State Country Sip Country 32955 USA  6. Name and Address of Current Registered Agent  Solo N. ATLANTIC AVE COCOA BEACH, FL 32931  3. Mailing Address 976 Brevard Dave 04162007 Chg-NP CR2E037 (12/06)  City & State Country Sip Country Sip Country Sp-3048626 Not Applied For Not Applied For Sp-3048626 Not Applied For Sp-3048626 Required  7. Name and Address of New Registered Agent Name	Principal Place	e of Business							
COCOA BEACH, FL 32931  COCOA BEACH, FL 32931  2. Principal Place of Business - No P.O. Box # 976 Brevarb Ave 9	Principal Place of Business - No P.O. Box # 3. Mailing Address 976 Brevarb Ave Suite, Apt. #, etc. 976 Brevarb Ave Suite, Apt. #, etc. 9462007 Chg-NP CR2E037 (12/06)  City & State Country Sip Country 32955 USA 5. Name and Address of Current Registered Agent 1. Name 1. Name				BERG					
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976 Brevario Ave Suite, Apt. #, etc.  City & State Rock(   20ge   F   Country 32955  Country 32955  Country 32955  Sonne and Address of Current Registered Agent  Name  Sonne Berg, Bruce D 5600 N. ATLANTIC AVE  Suite, Apt. #, etc.  O4162007 Chg-NP CR2E037 (12/06)  4. FEI Number 59-3048626  Not Applied Ff 59-3048626  Street Address (P.O. Box Number is Not Acceptable)	976 Brevario Ave Suite, Apt. #, etc.  City & State Country 32955  Country 32955  Country 32955  Country 32955  Country 32955  Country 32965  Country 32966  Not Applied For 59-3048626  Not Applied For 75-3048626  Not Applied For 75-304862	COCON DEAG	11,12 32331	OOOON DENGIN, I'E 3230	<b>,</b>	1 (1881) 1 601 (1118				
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Zip Country 32955 US 4 5. Certificate of Status Desired \$8.75 Additional Fee Required  6. Name and Address of Current Registered Agent  SONNENBERG, BRUCE D 5600 N. ATLANTIC AVE  Street Address (P.O. Box Number is Not Acceptable)	Zip Country Zip Country 3 2 9 5 USH 3 2 9 5 5 USH  6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name			1 - '	EI :		6	<del></del>		
5. Name and Address of Current Registered Agent  SONNENBERG, BRUCE D  5600 N. ATLANTIC AVE  Street Address (P.O. Box Number is Not Acceptable)	5. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  Name	Zip	Country	Zip	Country	5. Certificate of Str		. <b>75</b> Addi	itional	
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SONNENBERG, BRUCE D 5600 N. ATLANTIC AVE Street Address (P.O. Box Number is Not Acceptable)			6. Name and Address of Current	Registered Agent	Name	7. Name and Add	ress of New Registered Age	nt		
		5600 N. ATLANTIC AVE COCOA BEACH, FL 32931				s (P.O. Box Number is N	Not Acceptable)			
COCOA BEACH, FL 32931	OCOA BEACH, FL 32931	COCOA B	EACH, FL 32931							
City — Zin Code		,			City			Zip Code		
FL   Zip code	City — 7 in Code				City		FL	Zip Code	•	
	City FL Zip Code			or the purpose of changing its re	egistered office or regis	tered agent, or both, in	the State of Florida. I am fami	iliar with, a	and accept	
the obligations of 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. I am familiar with, and accept	the obligat	ions of registered agent.							
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SIGNATURE Signature, typed or printed name of registered agent and title Japplicable. (NOTE. Registered Agent signature required when reinstating)  DATE	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.			سيدب			4.23.07			
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Filing Fee is \$61.25  9. Election Campaign Financing \$5.00 May Be  Added to Fees Florida Department of State	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.  GNATURE  Signature, typed or printed named registered agent and title sapplicable. (NOTE, Registered Agent signature required when reinstating)  DATE  Filling Fee is \$61.25  9. Election Campaign Financing  \$5.00 May Be  Make check payable to	SIGNATURE	Filing Fee is \$61.25	9. Election Camp	paign Financing	\$5.00 May Be	Make check pa	-		
Due by May 1, 2007 Trust Fund Contribution. Added to Fees Florida Department of State	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.  GNATURE    Signature, typed or printed name of registered agent and title supplicable. (NOTE. Registered Agent signature required when reinstating)    PL		Filing Fee is \$61.25 Due by May 1, 2007	9. Election Camp Trust Fund Co	paign Financing ontribution.	\$5.00 May Be Added to Fees	Make check pa Florida Departme	ent of St	ate	
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Trust Fund Contribution. Added to Fees Florida Department of State  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10  TITLE DP Delete TITLE SPAIN, DEBRA STREET ADDRESS CITY-ST-ZIP COCOA BCH, FL 32931  TITLE VD Delete TITLE SPAIN, DAVID W STREET ADDRESS 3901 N. ATLANTIC AVE. STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COCOA BCH, FL 32931  TITLE S STREET ADDRESS CITY-ST-ZIP COCOA BCH, FL 32931  TITLE S Delete TITLE S CHANGE ADDRESS CITY-ST-ZIP  TITLE S DELETE DELETE TO COCOA BCH, FL 32931  TITLE S DELETE TO COCOA BCH, FL 32931	The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I am lamiliar with, and accept the obligations of registered agent.  GNATURE    Signature, typed or printed name of registered agent and titley applicable   (NOTE: Registered Agent signature required when reinstating)   DATE	10.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS	Filing Fee is \$61.25 Due by May 1, 2007  OFFICERS AND DI  DP GREEN, DEBRA 1550 N. ATLANTIC AVE. COCOA BCH, FL 32931  VD SPAIN, DAVID W 3901 N. ATLANTIC AVE. COCOA BCH, FL 32931  S WILLIAMSON, THOMAS C 3428 N. ATLANTIC AVE.	9. Election Camp Trust Fund Co	paign Financing ontribution.  11.  TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STREET ADDRESS STREET ADDRESS	\$5.00 May Be Added to Fees	Make check pa Florida Departme ES TO OFFICERS AND DIREC	ent of State	10 Addition	
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5600 N. ATLANTIC AVE  Street Address (P.O. Box Number is Not Acceptable)			6. Name and Address of Current	Registered Agent	Name	7. Name and Add	ress of New Registered Age	nτ		
SONNENBERG, BRUCE D 5600 N. ATLANTIC AVE Street Address (P.O. Box Number is Not Acceptable)						7. Name and Add	ress of New Registered Age	nt		
SONNENBERG, BRUCE D 5600 N. ATLANTIC AVE  Name Street Address (P.O. Box Number is Not Acceptable)	Name	3793			USA		Fee	•	<del>1</del>	
5. Name and Address of Current Registered Agent  Name  SONNENBERG, BRUCE D  5600 N. ATLANTIC AVE  7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)	Name and Address of Current Registered Agent     Name and Address of New Registered Agent     Name					5. Certificate of St				
3 2 9 5	3 2 9 5 USH 3 2 9 5 USA 5. Certificate of Status Desired Fee Required  6. Name and Address of Current Registered Agent Name  Name		ledge Fl.	Rockledge	<u> </u>		6	<del></del>		
Rock   20ge   Fl.   Rock   20ge   Fl.   59-3048626   Not Applic   2ip   Country   32955   USH   32955   USH   32955   USH   5. Certificate of Status Desired   \$8.75 Additional Fee Required   Fee Required   Fee Required   SONNENBERG, BRUCE D   5600 N. ATLANTIC AVE   Street Address (P.O. Box Number is Not Acceptable)	Country 3 2 9 55 USH Solutional Fee Required  Tip Country 3 2 9 55 USH Solutional Fee Required  To Name and Address of Current Registered Agent  Name  To Name and Address of New Registered Agent  Name	City & State	e	City & State				<u>, , , , , , , , , , , , , , , , , , , </u>	plied For	
City & State ROCK   FOR FILE   See Required  Sonnembers of Current Registered Agent  Name  Sonnembers   Sonnembers   Street Address (P.O. Box Number is Not Acceptable)	City & State City & State City & State City & State Country Co	I			110 1102	04162007 CH	na-NP CR2E037 (	12/06)		
Suite, Apt. #, etc.  Suite, Apt. #, etc.  O4162007 Chg-NP CR2E037 (12/06)  City & State	Suite, Apt. #, etc.  Suite, Apt. #, etc.  O4162007 Chg-NP CR2E037 (12/06)  City & State City & State Country C		_	<u> </u>	.r. A		\$		10     1   10	
976 Brevario Ave Suite, Apt. #, etc.  City & State Rock(   20ge   F   Country 32955  Country 32955  Country 32955  Sonne and Address of Current Registered Agent  Name  Sonne Berg, Bruce D 5600 N. ATLANTIC AVE  Suite, Apt. #, etc.  O4162007 Chg-NP CR2E037 (12/06)  4. FEI Number 59-3048626  Not Applied Ff 59-3048626  Street Address (P.O. Box Number is Not Acceptable)	976 Brevario Ave Suite, Apt. #, etc.  City & State Country 32955  Country 32955  Country 32955  Country 32955  Country 32955  Country 32965  Country 32966  Not Applied For 59-3048626  Not Applied For 75-3048626  Not Applied For 75-304862			T 2- 2- 22						
2. Principal Place of Business - No P.O. Box # 976 Brevarb Ave	Principal Place of Business - No P.O. Box # 3. Mailing Address 976 Brevar D Ave Suite, Apt. #, etc. 04162007 Chg-NP CR2E037 (12/06)  City & State Country Sip Country 32955 USA 5. Name and Address of Current Registered Agent 1. Name 1. Nam	5600 N. ATL	ANTIC AVE	5600 N. ATLANTIC AVE						
5600 N. ATLANTIC AVE COCOA BEACH, FL 32931  2. Principal Place of Business - No P.O. Box # 976 Brevia to Ave Suite, Apt. #, etc.  City & State Rock   South	Solo N. ATLANTIC AVE COCOA BEACH, FL 32931  Principal Place of Business - No P.O. Box # 3. Mailing Address 976 Brevard Dave Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State Country Sip Country 32955 USA  6. Name and Address of Current Registered Agent  Solo N. ATLANTIC AVE COCOA BEACH, FL 32931  3. Mailing Address 976 Brevard Dave 04162007 Chg-NP CR2E037 (12/06)  City & State Country Sip Country Sip Country Sp-3048626 Not Applied For Not Applied For Sp-3048626 Not Applied For Sp-3048626 Required  7. Name and Address of New Registered Agent Name	Principal Place	e of Business	Mailing Address		-				
C/O BRUCE D. SONNENBERG 5600 N. ATLANTIC AVE COCOA BEACH, FL 32931  2. Principal Place of Business - No P.O. Box # 976 Brevard D Ave Suite, Apt. #, etc.  City & State BOCK FL 20 a Fl.  City & State BOCK FL 20 a Fl.  City & State BOCK FL 20 a Fl.  Country	O BRUCE D. SONNENBERG SOO N. ATLANTIC AVE SOON ATLANTIC AVE COCOA BEACH, FL 32931  Principal Place of Business - No P.O. Box #  9 76 Brevar Ave Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State Cocontry 3 2955  Country 3 2955  Country 3 2955  Country 3 2955  Country Country 3 2955  Country Countr	/ .55551/	OA BEACH AREA HOTEL	AND MOTEL			1 20 2001 90232 001	01.	.25	
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  2. Principal Place of Business - No P.O. Box # 976 Brevard Ave Suite, Apt. #, etc.  City & State BOCK ROW State Country 32955 Country 32955 Country 32955 Country 32955 Country 32955 Country 32955 Country Size Apt. # State BOCK ROW State Cocoa BEACH, FL 32931  3. Mailing Address 976 Brevard Dave	HE COCOA BEACH AREA HOTEL AND MOTEL  SSOCIATION, INC.  Mailing Address  O BRUCE D. SONNENBERG  O BRUCE D. SONNENBERG  SOO N. ATLANTIC AVE  SOO N. ATLANTIC AVE  COCOA BEACH, FL 32931  Principal Place of Business - No P.O. Box #  9 76 Brevarb Ave  Suite, Apt. #, etc.  Suite, Apt. #, etc.  City & State  O CIC Ledge  FI  Country  3 2955  Country  3 2955  Country  3 2955  Country  3 2955  Country  Suite Agent  Applied For  Social Place of Status Desired  \$8.75 Additional Fee Required  7. Name and Address of New Registered Agent  Name	THE COC	···							
1. Entity Name THE COCOA BEACH AREA HOTEL AND MOTEL ASSOCIATION, INC.  Principal Place of Business C/O BRUCE D. SONNENBERG S600 N. ATLANTIC AVE COCOA BEACH, FL 32931  2. Principal Place of Business - No P.O. Box # 976 Brevarb Ave Suite, Apt. #, etc.  City & State ROCK   Edg & Fl Rock   Edg & Fl Suite, Apt. #, etc.  City & State ROCK   Edg & Fl Rock   Edg & Fl South Spanness   Santage   Santage    Country 3295   US# 3295   US# 3295   US# 5000 N. ATLANTIC AVE  SONNENBERG, BRUCE D SONNENBERG, BRUCE D Sonnenberg   Street Address (P.O. Box Number is Not Acceptable)	Country & State  Country  Coun	1. Entity Nam	ひょうしんしょう せいしゅうしゅ							

12. I hereby certify that the information supplied with this filling 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.

TITLE NAME

STREET ADDRESS

CITY-ST-ZIP

□ Delete

SIGNATURE:

TITLE

NAME STREET ADORESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SYNNING OFFICER OR DIRECTOR

4.23.07

Daylime Phone #

☐ Change

Addition