

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2008 8:00 am
Secretary of State

04-21-2008 90076 045 ****61.25

DOCUMENT # N36429 1. Entity Name COCOA PINE ESTATES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 2081 NW 25TH ST BOCA RATON, FL 33431 US			Mailing Address 2081 NW 25TH ST BOCA RATON, FL 33431 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0176322	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent MITCHELL MANAGEMENT OF BOCA RATON, INC. 2081 NW 25TH ST BOCA RATON, FL 33431				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City <div style="display: flex; justify-content: space-between;"> FL Zip Code </div>	
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CAPLAN, PHIL <input type="checkbox"/> Delete 12880 COCOA PINE DRIVE BOYNTON BEACH, FL 33436		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Caplan, Phil <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12880 Cocoa Pine Drive Boynton Beach, FL 33436	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP OLSON, RICHARD <input type="checkbox"/> Delete 12839 COCOA PINE DR BOYNTON BEACH, FL 33436		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP Olson, Richard <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12839 Cocoa Pine Drive Boynton Beach, FL 33436	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD ROSE, ROBERT <input type="checkbox"/> Delete 12810 COCOA PINE LANE BOYNTON BEACH, FL 33436		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP Miller, Jane <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4930 Glenn Pine Lane Boynton Beach, FL 33436	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP MILLER, JANE <input type="checkbox"/> Delete 4930 GLENN PINE LANE BOYNTON BEACH, FL 33436		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT Fulcher, Ron <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4931 Glenn Pine Lane Boynton Beach, FL 33436	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SMITH, STEVE <input checked="" type="checkbox"/> Delete 12908 COCOA PINE DRIVE BOYNTON BEACH, FL 33436		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Rose, Bob <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 12810 Cocoa Pine Drive Boynton Beach, FL 33436	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
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:			4-15-08		
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		
<small>Daytime Phone #</small>					