

2000 UNIFORM BUSINESS REPORT (UBR)

2/

FILED
May 02, 2000 8:00 am
Secretary of State

02-13-2000 90013 049 ****61.25

DOCUMENT # N39099

1. Entity Name

CORAL PALMS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

6700 NW 88TH AVENUE
 N. PINE ISLAND RD.
 TAMARAC FL 33321

Mailing Address

6700 NW 88TH AVENUE
 N. PINE ISLAND RD.
 TAMARAC FL 33321-3725

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number
65-0315889

Applied For
 Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
 Fee Required

6. Name and Address of Current Registered Agent

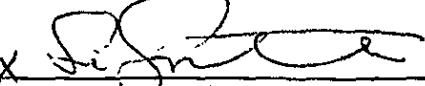
7. Name and Address of New Registered Agent

LUCCA, ANTHONY P
6708 N.W. 88TH AVENUE
TAMARAC FL 33321

Name: **SONNY GENTILE**
 Street Address (P.O. Box Number is Not Acceptable):
6706 N.W. 88 AVE

City: **TAMARAC** FL Zip Code: **33321**

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.

SIGNATURE 

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

(NOTE: Registered Agent signature required when reinstating)

DATE **1/26/00**

FILE NOW:
FEES IS \$61.25

9. Election Campaign Financing
 Trust Fund Contribution. ☐

\$5.00 May Be
 Added to Fees

Make Check Payable to
Department of State

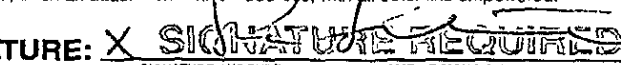
10. OFFICERS AND DIRECTORS

TITLE	TVP	☐ Delete
NAME	KAPLAN, MYRON	
STREET ADDRESS	6712 N.W. 88TH AVENUE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	D	☐ Delete
NAME	ROSSELL, FRANK	
STREET ADDRESS	6470 NW 88TH AVENUE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	P	☒ Delete
NAME	LUCCA, ANTHONY P	
STREET ADDRESS	6708 N.W. 88TH AVENUE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	TTR	☒ Delete
NAME	LUCCA, SHIRLEY A	
STREET ADDRESS	6708 N.W. 88TH AVENUE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	SD	☒ Delete
NAME	SMITH, DIANE	
STREET ADDRESS	6720 SW 88TH AVE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	PRES	☒ Change ☐ Addition
NAME	SONNY GENTILE	
STREET ADDRESS	6706 N.W. 88 AVE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	V. PRES	☐ Change ☒ Addition
NAME	NANCY GILBERT	
STREET ADDRESS	6718 NW 88 AVE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	SEC. + TREAS.	☐ Change ☒ Addition
NAME	FRANK D. ROSSELL	
STREET ADDRESS	6740 N.W. 88 AVE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	Sgt. AT ARMS	☐ Change ☒ Addition
NAME	ROBERT MIKES	
STREET ADDRESS	6746 N.W. 88 AVE	
CITY-ST-ZIP	TAMARAC FL 33321	
TITLE	Sgt. AT ARMS	☒ Change ☐ Addition
NAME	MYRON KAPLAN	
STREET ADDRESS	6712 N.W. 88 AVE	
CITY-ST-ZIP	TAMARAC, FL 33321	
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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:  SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-26-00 954-756-3542

Date Daytime Phone #

CR2E037 (9/99)