2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 06, 2006 8:00 am
Secretary of State
02-06-2006 90086 006 ****61.25

DOCUMENT # N39099

1. Entity Name
CORAL PALMS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6700 PINE IS. RD. TAMARAC, FL 33321	CORAL PALMS HOA P.O. BOX 9519 CORAL SPRINGS, FL 33075

01052006 Chg-NP CR2E037 (11/05)

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

SOUTHEAST CONDOMINIUM MGT, INC
2855 S UNIVERSITY DR
SUITE 310
CORAL SPRINGS, FL 33065

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City **FL** Zip Code

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 Frank Russell 2/3/06
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 May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	S PARISH, JERRY 6708 N PINE ISLAND ROAD TAMARAC, FL 33321	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T/S	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T THOMAS, ELLA 6766 N. PINE ISLAND RD. TAMARAC, FL 33321	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Rossell, Mickey 6740 Pine Island Rd. Tamarac, FL 33321	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D GILBERT, NANCY 6718 N PINE ISLAND ROAD TAMARAC, FL 33321	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	X	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P SCHUTT, STEPHEN 6770 N. PINE ISLAND RD. TAMARAC, FL 33321	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V MIKES, ROBERT 6746 N. PINE ISLAND RD. TAMARAC, FL 33321	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V LUANNE TOURKATLY 6718 N. PINE ISLAND RD TAMARAC FL 33321	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ 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: Frank Russell FRANK D. ROSSELL 2/03/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #