. 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2007 8:00 am Secretary of State

04-03-2007 90010 010 ****70.00

DOCUMENT # N39480

1. Entity Name



	ERA AT CORAL LAKE ATION, INC.	SCONDOM	IINIUM								
Principal Place of Business C/O COURTESY PROPERTY MANAGEMENT 13250 SW 135TH AVE. MIAMJ, FL 33186 US		C/O 0 1325	Mailing Address C/O COURTESY PROPERTY MANAGEMENT 13250 SW 135TH AVE. MIAMI, FL 33186 US								
2. Principal Place of Business - No P.O. Box #		# 3. Maili	3. Mailing Address								
Suite, Apt. #, etc.		Suit	Suite, Apt. #, etc.			03082007	Chg-NP	CR	2E037 ((12/06)	
City & Stat	е	City	/ & State			4. FEI Numbe 65-0191	028			_ 	plied For t Applicable
Zip _	Country	Zip		Country		5. Certificate	of Status Desi	ed 🔀		3.75 Add a Required	
	6. Name and Address of C	urrent Registere	d Agent	Name		7. Name and	Address of N	ew Regist	ered Age	int	
SKRLD IN	С			Name							
201 ALHAMORA CIR				Street A	ddress (P.	O. Box Numbe	r is Not Accer	otable)			
STE - 110	2 ABLES, FL 33134										
COIVALO	ABEEG, 1 E 33134			City					FL	Zip Code	•
	named entity submits this stater	ment for the purpo	ose of changing its re	egistered office or	registered	d agent, or bot	n, in the State	of Florida.	I am fam	niliar with,	and accept
SIGNATURE	Signature, typed or printed name of register	red agent and title if appl	licable. (NOTE;	Registered Agent signati	w beniupen enu	rhen reinstating)		τ	DATE		
SIGNATURE	Signature, typed or printed name of register Filling Fee is \$61.25 Due by May 1, 2007	red agent and title if appl	9. Election Camp Trust Fund Co	paign Financing		\$5.00 May Badded to Fees	8		check p	ayable to	1
SIGNATURE	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS A	red agent and title if applications and title if applications are seen as a seen are seen as a seen are seen	9. Election Camp	paign Financing		55.00 May B		Make (Florida D	check p Departm	ent of St	ate
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10. TITLE NAME	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS A PD GONZALEZ, NORMA		9. Election Camp Trust Fund Co	paign Financing ontribution. 11. TITLE NAME	D Feen	\$5.00 May Badded to Fees	RUDY 3 Ln	Make (Florida D	check p Departm ND DIREC	ent of St	ate
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10. TITLE NAME STREET ADDRESS CITY-SI-ZIP	Filing Fee is \$61.25 Due by May 1, 2007 OFFICERS A PD GONZALEZ, NORMA 8650 NW 3 LANE, #8 MIAMI, FL 33126 TD SALADIN, ALBERT		9. Election Carry Trust Fund Co	paign Financing ontribution. 11. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	D FERN 865	\$5.00 May B. Added to Fees DDITIONS/CHAN DES, O NW	RUDY 3 Ln	Make (Florida D	check p Departm ND DIREC	ent of St CTORS IN Change	ate 10
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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: .

NORMA GONZALEZ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

MARCH-281

07 305-264-5405