2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 04, 2006 8:00 am
Secretary of State
05-04-2006 90232 036 ****61.25

DOCUMENT # N40543

1. Entity Name
COCO PLUM TERRACES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
107 AVE D OFFICE 215 MARATHON, FL 33050 US	107 AVE D OFFICE 215 MARATHON, FL 33050 US

400844**

04262006 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 65-0348369 ☐ 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
FISCHER, ED 105 AVE. D #107 MARATHON, FL 33050	Name: Linda Kruszka Street Address (P.O. Box Number is Not Acceptable): 5800 Overseas Hwy Ste 6 City: Marathon FL Zip Code: 33050

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: Linda M Kruszka 4/26/06
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	PD KAZMAIER, KARL 4244 COLONY CLUB PORT CLINTON, OH 43452	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Pres John Chiodo 107 Avenue D Marathon FL 33050	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP BAGWELL, PALMER 1884 PINE TRL. EAST TAWAS, MI 48730	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Director Palmer Bagwell same	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD BURTON, RICHARD 959 CAPSTAN DR. FORKED RIVER, NJ 08731	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP Ron David 107 Avenue D Marathon FL 33050	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD SCHMIDT, PATRICIA 1864 N US. 23 EAST TAWAS, MI 48730	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treas Kathy LaMonte 107 Avenue D Marathon FL 33050	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D REESE, THOMAS 2 BUFFALO AVE. NIAGARA FALLS, NY 14303	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: John Chiodo 4/26/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #