

2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001995

FILED
Jan 15, 2009
Secretary of State

Entity Name: COSTA BRAVA PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1901 S CONGRESS AVE
SUITE 480
BOYNTON BEACH, FL 33426 US

New Principal Place of Business:

Current Mailing Address:

1901 S CONGRESS AVE
SUITE 480
BOYNTON BEACH, FL 33426 US

New Mailing Address:

FEI Number: 65-0412125

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CAS REALTY MANAGEMENT LLC
1901 SOUTH CONGRESS AVE
SUITE 480
BOYNTON BEACH, FL 33426 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: MARGOLIS, SEYMOUR
Address: 6433 BRAVA WAY
City-St-Zip: BOCA RATON, FL 33433

Title: S () Delete
Name: ROSEN, RICHARD
Address: 23426 ALZIRA CIR
City-St-Zip: BOCA RATON, FL 33433

Title: V () Delete
Name: KOCHMAN, BARRY L
Address: 6438 BRAVA WAY
City-St-Zip: BOCA RATON, FL 33433

Title: T () Delete
Name: WINOKUR, TERRY
Address: 6529 COLOMERA DR
City-St-Zip: BOCA RATON, FL 33433

Title: V () Delete
Name: JOSEPH, HARRIET
Address: 6386 BRAVA WAY
City-St-Zip: BOCA RATON, FL 33433

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SEYMOUR MARGOLIS

PRES

01/15/2009

Electronic Signature of Signing Officer or Director

Date