2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 8:00 am Secretary of State

DOCUMENT # N9300003741 1. Entity Name CORAL PALM VILLAGE HOMEOWNER'S ASSOCIATION, INC.								04-25-200)5 90286 (150 ****6	1.25	
Principal Place of Business CORAL PALM VILLAGE 9796 ROYAL PALM BLVD CORAL SPRINGS, FL 33065 US			Mailing Address -C/O CEC CORPORATION- 4817 NE 23 AVE									
Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address 9796 Royal Palm Blv. Suite, Apt. #, etc.				•		11 111 11 111 1111 1		Wei of 1884	
						01192005	Chg-NP	CR2E0	37 (10/03)			
City & State			y & State Spri	ngs, fr	ngs,fl		6229		<u> </u>	plied For t Applicable		
Zíp	Zip Country		3 ^{Zig}	3.065	Country	Country 5. Certific			ate of Status Desired			
	6. Name	and Address of Current	d Agent	No.		7. Name and	Address of Nev	v Registered	Agent _			
CEC CORPORATION 4817 NE 23 AVENUE FORT LAUDERDALE, FL 33308 Name Street Address (P.O. Box Number is Not Acceptable)												
					City				FL	Zip Code	9	
		ty submits this statement for stered agent.	or the purp	ose of changing its	registered office or	register	ed agent, or bot	h, in the State of	Florida. I am	familiar with,	and accept	
SIGNATURE X 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, 2005							wildir tolitolaling)		DAIL		1	
	_	ee is \$61.25			npaign Financing		\$5.00 May B	e F	·	k payable to tment of St		
10.	Due by I	ee is \$61.25	•	9. Election Can Trust Fund C	npaign Financing contribution.		\$5.00 May B Added to Fees	ANGES TO OFFI	Make chec lorida Depai	tment of SI	tate	
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Indicated on this report or supplied with this limit obes not qualify for the earthful stated in section 113,07, Florida Statutes. That is a made under oath; that I am an discussed 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.

Marianne Olstad

SIGNATURE: **公**