

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000004115

FILED  
Apr 28, 2008  
Secretary of State

Entity Name: COCOBAY CONDOMINIUM, INC.

## Current Principal Place of Business:

7800 PELICAN BAY BLVD.  
NAPLES, FL 34108 US

## New Principal Place of Business:

COCO BAY DRIVE/COURT  
NAPLES, FL 34108 US

## Current Mailing Address:

COLLIER FINANCIAL, INC.  
4985 TAMiami TRAIL E.  
NAPLES, FL 34113 US

## New Mailing Address:

FEI Number: 65-0477304      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

HART, STEPHEN P  
4993 TAMiami TRL. EAST  
NAPLES, FL 34113 US

## Name and Address of New Registered Agent:

HART, STEPHEN P  
4985 TAMiami TRAIL EAST  
NAPLES, FL 34113 US

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: STEPHEN HART

04/28/2008

Electronic Signature of Registered Agent

Date

## OFFICERS AND DIRECTORS:

Title: TD ( ) Delete  
Name: KRAMER, DON  
Address: 7841 COCOBAY CT  
City-St-Zip: NAPLES, FL 34108

Title: D ( ) Delete  
Name: KERR, ED  
Address: 7918 COCOBAY DRIVE  
City-St-Zip: NAPLES, FL 34108

Title: SD ( ) Delete  
Name: ARTHUR, HELGA  
Address: PO BOX 719  
City-St-Zip: OSTERVILLE, MA 02655

Title: PD ( ) Delete  
Name: LEWIS, CHARLES  
Address: 7804 COCOBAY CT.  
City-St-Zip: NAPLES, FL 34108

Title: VD ( ) Delete  
Name: JOHNSON, TOM W  
Address: 7881 COCOBAY DRIVE  
City-St-Zip: NAPLES, FL 34108

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition  
Name: ARTHUR, HELGA  
Address: 7861 COCOBAY DRIVE  
City-St-Zip: NAPLES, FL 34108

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: CHARLES LEWIS

PD

04/28/2008

Electronic Signature of Signing Officer or Director

Date