2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9400006005

FILED Apr 27, 2007 Secretary of State

Entity Name: CORAL PLAZA CONDOMINIUM ASSOCIATION OF LEHIGH ACRES. INC.

			CIXTICIT OF ELFIGITACINE	5, 1140.	
Current Pr	incipal Place	of Business:	New Principal Pla	New Principal Place of Business:	
1140 LEE E LEHIGH AC	BLVD. CRES, FL 339	36			
Current Ma	ailing Addres	s:	New Mailing Add	New Mailing Address:	
1591 HAYL SUITE 203 FORT MYE	EY LANE RS, FL 33907	,		403 JOAN AVE STE D LEHIGH ACRES, FL 33971	
FEI Number:	65-0561879	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
DEETSCREEK, DAVID D MR. 1591 HAYLEY LANE SUITE 203 FORT MYERS, FL 33907 US			403 JOÁN AVE ST	STOUT, J NATHAN 403 JOAN AVE STE D LEHIGH ACRES, FL 33971 US	
The above in the State		ubmits this statement for the p	ourpose of changing its registe	ered office or registered agent, or both,	
SIGNATUR	E: J NATHAI	N STOUT		04/27/2007	
	Electron	ic Signature of Registered Age	ent	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () STOUT, NATHAI 1140 LEE BLVD LEHIGH ACRES).	Title: Name: Address: City-St-Zip:	()Change ()Addition	
Title: Name: Address: City-St-Zip:	SD () MCWILLIAMS, V 1140 LEE BLVD LEHIGH ACRES).	Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () MILLER, KIM 1140 LEE BLVD LEHIGH ACRES		Title: Name: Address: City-St-Zip:	() Change() Addition	
Title: Name: Address: City-St-Zip:	D () KEELAN, MICH/ 1140 LEE BLVD LEHIGH ACRES).	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: J NATHAN STOUT P 04/27/2007