## FILED Apr 18, 2007 8:00 am Secretary of State 04-18-2007 90160 026 \*\*\*\*61.25

## **2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

All Martin Process Process (P.O. Box martin Process Appendix Process P	DOCUMENT # N9600001840  1. Entity Name HOMEOWNERS' ASSOCIATION OF CORAL COAST, INC.								6701			
Suite, April, F. etc.    Sicin, April, F. etc.   Sicin, April, F. etc.   Sicin, April, F. etc.   Sicin, April, F. etc.   Sicin, April, F. etc.   Sicin, April, F. etc.   Appiled For Schools Schools School   Appiled For Schools School   Sicin Schoo	KEY LARGO, FLORIDA PO BOX 9566 CORAL COAST SUBDIVISION TAVERNIER, FL 33070								A 9111	TIL <b>DD</b> IN <b>Brig</b> lai <b>r</b>		
City & State    City & State	Principal Place of Business - No P.O. Box # 3. Mailing Address											
Section   Sect	Suite, Apt. #, etc.				Suite, Apt. #, etc.			03282007	Chg-NP	CR2E03	7 (12/06)	
6. Name and Address of Current Registered Agent  7. Name and Address of New Registered Agent  HAMMERSTROM, JOHN 115 COASTAL DRIVE KEY LARGO, FL 33037  City  FL Zip Code  8. The above named emily submits this steament for the purpose of changing its registered office or registered agent, or both, in the State of Rorde. It and semilar with, and accept the obligations of registered agent.  SIGNATURE  FIHING Fee Is \$61.25  Due by May 1, 2007  10. OFFICERS AND DIRECTORS  11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.  ADDITIONS/C	Cily & State	е		Cit	City & State				47		<u> </u>	
Name Street Accress (P.O. Box Number is Not Acceptable)    City	Zip	Country			)	Col	intry	5. Certilicate of S	Status Desired			
HAMMERSTROM, JOHN 115 COASTAL DRIVE KEY LARGO, FL 33037  City FL Zip Code  8. The above named entity submiss this stetement for the purpose of changing is registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.  SIGNATURE  SIGNATU	6. Name and Address of Current Registered Agent							7. Name and Ad	dress of New i	Registered A	gent	
City FL Zip Code  8. The above named entity submiss this statement for the purpose of changing its registered office or registered agent, or both, in the Sinte of Florida. I are familiar with, and accept the obligations of registered agent.  SIGNATURE    Filing Fee is 361.25   Due by May 1, 2007   Prices 3.41.25   Prices 3	HAMMERSTROM, JOHN						Name					
B. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of registered agent, or both, in the State of Rorida. I am familiar with, and eccept the obligations of Rorida. I am familiar with, and eccept the obligations of Rorida. I am familiar with, and eccept the obligations of Rorida. I am familiar with, and eccept the obligations of Rorida. I am familiar with, and eccept the state of Rorida. I am familiar with, and eccept the state of Rorida. I am familiar with, and eccept the State of Rorida. I am familiar with, and eccept the State of Rorida. I am familiar with, and eccept the state of Rorida. I am familiar with, and eccept the Rorida. I am familiar with and ec	115 COASTAL DRIVE						Street Accress (P.O. Box Number is Not Acceptable)					
8. The above named entity submits this statement for the purpose of changing its registered agent, or both, in the State of Florida. I ran familiar with, and accept the obligations of registered agent.    Signature							City		<u>-</u>	FI	Zip Code	•
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