

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 17, 2006 8:00 am
Secretary of State

01-17-2006 90268 016 ****61.25

DOCUMENT # N97000006438

1. Entity Name
**THE CORALS OF OAKLAND PARK HOMEOWNERS'
ASSOCIATION, INC.**



Principal Place of Business
**2787 E. OAKLAND PARK BLVD.
SUITE 404
FORT LAUDERDALE, FL 33306**

Mailing Address
**2787 E. OAKLAND PARK BLVD.
SUITE 404
FORT LAUDERDALE, FL 33306**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01062006 Chg-NP CR2E037 (11/05)

4. FEI Number
65-0801468

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**CRANE, DAVID W
2787 E. OAKLAND PARK BLVD.
SUITE 404
FORT LAUDERDALE, FL 33306**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
SEARS, BILL
4251 NE 16 AVE
OAKLAND PARK, FL 33334** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BLACK, JANET
1401 NE 39 STREET
OAKLAND PARK, FL 33334** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**S
BERNARDI, KEVIN
4731 NE 15TH TERR.
OAKLAND PARK, FL 33334** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
KELLEY, Thomas B
4211 NE 16 Avenue
Oakland Park, FL 33334** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**TD
SHAW, MARILYN
1727 NE 37 STREET
OAKLAND PARK, FL 33334** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
MCINTYRE, JACK
1593 NE 49TH ST.
OAKLAND PARK, FL 33334** ☒ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**VP
VOSS, Andrea
4041 NE 16 Terrace
Oakland Park, FL 33334** ☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
GUSTAS, LINDA J
3941 NE 13 AVENUE
OAKLAND PARK, FL 33334** ☐ Delete

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
S ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

01/11/06

Date

354-771-5503

Daytime Phone #