2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000005653

City-St-Zip:

ROCKLEDGE, FL 32955

FILED Apr 23, 2009 Secretary of State

Entity Name: THE PRESERVE AT COCONUT POINTE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

1978 ROCKLEDGE BLVD C/O SOUNDVIEW PROPERTY MANAGEMENT

SUITE 106 2061 INDIAN RIVER BLVD VERO BEACH, FL 32960

Current Mailing Address: New Mailing Address:

1978 ROCKLEDGE BLVD C/O SOUNDVIEW PROPERTY MANAGEMENT

SUITE 106 2061 INDIAN RIVER BLVD VERO BEACH, FL 32960

FEI Number: 59-3662051 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

ADVANCED PROPERTY MANAGEMENT PALESTRINI, PAUL
1978 ROCKLEDGE BLVD.
2061 INDIAN RIVER BLVD

SUITE 106 VERO BEACH, FL 32960 US
ROCKLEDGE, FL 32955 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: PAUL PALESTRINI 04/23/2009

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS: ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: TD () Delete Title: TD (X) Change () Addition

 Name:
 BOOZER, OTTO S
 Name:
 BOOZER, OTTO S

 Address:
 ROCKLEDGE BLVD. # 106
 Address:
 119 SABAL RIDGE LANE, 4A

 City-St-Zip:
 ROCKLEDGE, FL 32955
 City-St-Zip:
 MELBOURNE BEACH, FL 32951

Title: SD () Delete Title: P (X) Change () Addition

Name: TANNER, CATHERINE Name: TANNER, JOHN
Address: 1978 ROCKLEDGE BLVD. # 106 Address: 115 SABAL RIDGE LANE, 3A

Title: PD () Delete Title: S (X) Change () Addition

City-St-Zip:

MELBOURNE BEACH, FL 32951

Name:ALLEN, GWENDOLYNName:ALLEN, GWENDOLYNAddress:1978 ROCKLEDGE BLVD. # 106Address:105 SABAL RIDGE LANE, 1ACity-St-Zip:ROCKLEDGE, FL 32955City-St-Zip:MELBOURNE BEACH, FL 32951

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: JAYNE DEMELLO M 04/23/2009