

**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

DOCUMENT # N99000000333

1. Entity Name
CORAL KEY OF PALM BEACH HOMEOWNERS
ASSOCIATION, INC.



Principal Place of Business

Mailing Address

104 OLD JUPITER BEACH RD.
JUPITER, FL 33477 US

114 OLD JUPITER BEACH RD.
JUPITER, FL 33477 US

114 Old Jupiter Beach Rd, Jupiter, FL 33477

sent 2/24/05

FILED

06 MAY 16 AM 10:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



02112005 No Chg-NP CR2E037 (10/03)

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4. FEI Number
65-0897298

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

MORRIS, VIRGINIA
104 OLD JUPITER BEACH RD.
JUPITER, FL 33477

Pearsall, Sherry
114 Old Jupiter Beach
Road, Jupiter, FL
33477

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IN THIS SPACE**

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 Sherry Pearsall Sherry Pearsall, Treasurer

3/1/06

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, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

600075549616
05/31/06--01018--018 **\$1.25

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	MORTON, LISA
STREET ADDRESS	104 OLD JUPITER BEACH RD.
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	P
NAME	MORRIS, VIRGINIA
STREET ADDRESS	104 OLD JUPITER BEACH ROAD
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	T
NAME	PEARSALL, SHERRY
STREET ADDRESS	114 OLD JUPITER BEACH RD.
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	D
NAME	HOLMES, OLGA
STREET ADDRESS	108 OLD JUPITER BEACH ROAD
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	Rx P
NAME	HEYLMUM, TOM
STREET ADDRESS	110 OLD JUPITER BEACH ROAD
CITY-ST-ZIP	JUPITER, FL 33477
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Tom Heylmum

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

TOM HEYLMUM, PRESIDENT

3/1/06

561-628-1881