

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**May 01, 2007 8:00 am**  
**Secretary of State**

05-01-2007 90034 032 \*\*\*\*61.25

<b>DOCUMENT # N99000000333</b> 1. Entity Name <b>CORAL KEY OF PALM BEACH HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>114 OLD JUPITER BEACH RD. JUPITER, FL 33477 US</b>			Mailing Address <b>114 OLD JUPITER BEACH RD. JUPITER, FL 33477 US</b>		
2. Principal Place of Business - No P.O. Box # <b>110 Old Jupiter Beach Rd.</b>		3. Mailing Address <b>110 Old Jupiter Beach Rd.</b>			
Suite, Apt. #, etc. 		Suite, Apt. #, etc. 			
City & State <b>Jupiter, FL</b>		City & State <b>Jupiter, FL</b>		4. FEI Number <b>65-0897298</b>	
Zip <b>33477</b>		Country <b>USA</b>		Applied For <input type="checkbox"/> Not Applicable	
Zip <b>33477</b>		Country <b>USA</b>		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent  <b>PEARSALL, SHERRY 114 OLD JUPITER BEACH RD. JUPITER, FL 33477</b>				7. Name and Address of New Registered Agent Name <b>Thomas Heylmon</b> Street Address (P.O. Box Number is Not Acceptable) <b>110 Old Jupiter Beach Road.</b> City <b>Jupiter</b> <b>FL</b> Zip Code <b>33477</b>	
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 <small>Signature, typed or printed name of registered agent and title if applicable.</small>				DATE <b>4-25-07</b> <small>(NOTE: Registered Agent signature required when reinstating)</small>	
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
<b>Make check payable to Florida Department of State</b>					
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>MORTON, LISA</b> <b>104 OLD JUPITER BEACH RD.</b> <b>JUPITER, FL 33477</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D/T Legal, Jaime</b> <b>120 Old Jupiter Bch Rd.</b> <b>Jupiter, FL 33477</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>PEARSALL, SHERRY</b> <b>114 OLD JUPITER BEACH RD.</b> <b>JUPITER, FL 33477</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>D</b> <b>HOLMES, OLGA</b> <b>108 OLD JUPITER BEACH ROAD</b> <b>JUPITER, FL 33477</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P/D</b> <b>HEYLUM, TOM</b> <b>110 OLD JUPITER BEACH ROAD</b> <b>JUPITER, FL 33477</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				Date <b>4-25-07</b> <small>Daytime Phone #</small>	