

2009 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P08000035494

FILED
Mar 17, 2009
Secretary of State

Entity Name: THE IDEAL COASTAL ASSOCIATION MANAGEMENT CO. INC.

Current Principal Place of Business:

4400 FLOOD STREET
COCOA, FL 32927

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 236684
COCOA, FL 32923

New Mailing Address:

FEI Number: 26-2433407

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PALARDY, BEVERLY
6421 NW VERDI CT.
PORT SAINT LUCIE, FL 34986 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

Election Campaign Financing Trust Fund Contribution ().

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: PALARDY, DENNIS
Address: 4400 FLOOD STREET
City-St-Zip: COCOA, FL 32927

Title: VP () Delete
Name: PALARDY, PATRICIA
Address: 3612 CROSSBOW DR.
City-St-Zip: COCOA, FL 32926

Title: S () Delete
Name: PALARDY, CHARLES
Address: 6421 NW VERDI CT.
City-St-Zip: PORT SAINT LUCIE, FL 34986

Title: T () Delete
Name: PALARDY, BEVERLY
Address: 6421 NW VERDI CT.
City-St-Zip: PORT SAINT LUCIE, FL 34986

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: CHARLES PALARDY

SEC

03/17/2009

Electronic Signature of Signing Officer or Director

_____ Date