

2020 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 752940

Entity Name: COCOPLUM HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**155 ISLA DORADA BLVD
CORAL GABLES, FL 33143**Current Mailing Address:**155 ISLA DORADA BLVD
CORAL GABLES, FL 33143 US**FEI Number:** 59-2025096**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**SKRLD,INC
201 ALHAMBRA CIRCLE
SUITE 1102
MIAMI, FL 33134 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:**

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title	SECRETARY
Name	LORENZO-GOMEZ, INES
Address	155 ISLA DORADA
City-State-Zip:	CORAL GABLES FL 33143

Title	DIRECTOR
Name	TAYLOR, JEFFREY
Address	155 ISLA DORADA BLVD
City-State-Zip:	MIAMI FL 33143

Title	VP
Name	JIMENEZ, JOAN
Address	155 ISLA DORADA BLVD
City-State-Zip:	CORAL GABLES FL 33143

Title	DIRECTOR
Name	ISAIAS, CARLA
Address	155 ISLA DORADA BLVD
City-State-Zip:	CORAL GABLES FL 33143

Title	DIRECTOR
Name	CANCIO, JOSE
Address	155 ISLA DORADA BLVD
City-State-Zip:	CORAL GABLES FL 33143

Title	DIRECTOR
Name	DIGASBARRO, LISETTE
Address	155 ISLA DORADA BLVD
City-State-Zip:	CORAL GABLES FL 33143

Title	PRESIDENT
Name	GARNER, ROBERT
Address	155 ISLA DORADA BLVD
City-State-Zip:	CORAL GABLES FL 33143

I hereby 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 all other like empowered.

SIGNATURE: ROBERT GARNER

PRESIDENT

04/22/2020

Electronic Signature of Signing Officer/Director Detail

Date