

2023 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009837

Entity Name: COASTAL BAY HOMEOWNERS ASSOCIATION INC**Current Principal Place of Business:**C/O PHOENIX MANAGEMENT
6131 LAKE WORTH ROAD SUITE B
GREENACRES, FL 33463**Current Mailing Address:**C/O PHOENIX MANAGEMENT
6131 LAKE WORTH ROAD SUITE B
GREENACRES, FL 33463 US**FEI Number:** 51-0488869**Certificate of Status Desired:** No**Name and Address of Current Registered Agent:**BECKER & POLIAKOFF
1 E BROWARD BLVE
1800
FORT LAUDERDALE, FL 33301 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:** MARTY PLATTS

04/06/2023

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PRESIDENT
Name SULLO, RICKY
Address C/O PHOENIX MANAGEMENT
6131 LAKE WORTH ROAD SUITE B
City-State-Zip: GREENACRES FL 33463

Title DIRECTOR
Name BODE, MIKE
Address C/O PHOENIX MANAGEMENT
6131 LAKE WORTH ROAD SUITE B
City-State-Zip: GREENACRES FL 33463

Title TREASURER
Name GOSON, NICK
Address C/O PHOENIX MANAGEMENT
6131 LAKE WORTH ROAD SUITE B
City-State-Zip: GREENACRES FL 33463

Title VP
Name GROSS, SHAHN
Address C/O PHOENIX MANAGEMENT
6131 LAKE WORTH ROAD SUITE B
City-State-Zip: GREENACRES FL 33463

Title SECRETARY
Name HEADBURG, SCOTT
Address C/O PHOENIX MANAGEMENT
6131 LAKE WORTH ROAD SUITE B
City-State-Zip: GREENACRES FL 33463

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: RICKY SULLO

PRESIDENT

04/06/2023

Electronic Signature of Signing Officer/Director Detail

Date