

2019 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000007208

Entity Name: COACH HOMES IV AT MOODY RIVER ESTATES
CONDOMINIUM ASSOCIATION, INC.

FILED
Apr 10, 2019
Secretary of State
4072912975CC

Current Principal Place of Business:

3050 MOODY RIVER BLVD
NORTH FORT MYERS, FL 33903

Current Mailing Address:

C/O COASTAL ASSOCIATION SERVICES, LLC
P.O. BOX 152930
CAPE CORAL, FL 33915 US

FEI Number: 34-2032637

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

COASTAL ASSOCIATION SERVICES, LLC
C/O COASTAL ASSOCIATION SERVICES, LLC
P.O. BOX 152930
CAPE CORAL, FL 33915 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: TROY FUTCH

04/10/2019

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title VP
Name FREEMAN, MICHAEL
Address C/O COASTAL ASSOCIATION
SERVICES, LLC
P.O. BOX 152930
City-State-Zip: CAPE CORAL FL 33915

Title PRESIDENT
Name SHARKEY, JOANN
Address C/O COASTAL ASSOCIATION
SERVICES, LLC
P.O. BOX 152930
City-State-Zip: CAPE CORAL FL 33915

Title SECRETARY, TREASURER
Name WARD, THOMAS
Address C/O COASTAL ASSOCIATION
SERVICES, LLC
P.O. BOX 152930
City-State-Zip: CAPE CORAL FL 33915

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: JOANN SHARKEY

PRESIDENT

04/10/2019

Electronic Signature of Signing Officer/Director Detail

Date