


FILED
May 17, 2004 8:00 am
Secretary of State

05-03-2004 91007 013 ****61.25
 05-17-2004 90015 035 ****70.00

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 719753					
1. Entity Name CASTLEWOOD TOWN VILLAS CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 118 CASTLEWOOD DR. NORTH PALM BEACH, FL 33408			Mailing Address CASTLEWOOD TOWN VILLAS P O BOX 13125 NORTH PALM BEACH, FL 33408		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country	Zip		Country
4. FEI Number 59-2068007				Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>				<input type="checkbox"/> \$8.75 Additional Fee Required 03042003 Chg-NP CR2E037 (10/03)	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
SANDS, BRUCE 1645 PALM BEACH LAKES BLVD SUITE 1200 WEST PALM BEACH, FL 33401				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	
				FL	Zip Code
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)</small>					
Filing Fee is \$61.25 Due by September 8, 2004			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WM, BENNETT		NAME	Jason Smith	
STREET ADDRESS	129 LAHANE TERR		STREET ADDRESS	129 Lahane Terrace	
CITY-ST-ZIP	NO. PALM BEACH, FL 33408		CITY-ST-ZIP	N. Palm Bch, FL 33408	
TITLE	T	<input checked="" type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	DZENUTIS, PETER		NAME	Malinda Nohl	
STREET ADDRESS	129 LAHANE TERR		STREET ADDRESS	132 Wataw Lane	
CITY-ST-ZIP	N PALM BEACH, FL 33408		CITY-ST-ZIP	N. Palm Bch, FL 33408	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SURACI, VIRGINIA		NAME	Virginia Schulz	
STREET ADDRESS	118 CASTLE WOOD DR. 120		STREET ADDRESS	129 Lahane Terrace	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408		CITY-ST-ZIP	N. Palm Bch, FL 33408	
TITLE	S	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	AMUCHASTEGU, FERNANDO		NAME	Alicia Page	
STREET ADDRESS	129 LAHANE TERR # B6		STREET ADDRESS	118 Castlewood Dr.	
CITY-ST-ZIP	NORTH PALM BEACH, FL 33408		CITY-ST-ZIP	N. Palm Bch, FL 33408	
TITLE		<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME			NAME	Fernando Amuchastegui	
STREET ADDRESS			STREET ADDRESS	3114 S. Ocean # 205	
CITY-ST-ZIP			CITY-ST-ZIP	Highland Bch., FL 33487	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: <u>Melinda Nohl, Secretary</u> 5/12/04 561.841.4947					

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