

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jan 06, 2004
Secretary of State**

DOCUMENT# 722981

Entity Name: CONQUISTADOR CONDOMINIUM V ASSOCIATION, INC.

Current Principal Place of Business:

1800 S.E.ST.LUCIE BOULEVARD
CLUBHOUSE
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

1800 S.E.ST.LUCIE BOULEVARD
CLUBHOUSE
STUART, FL 34996

New Mailing Address:

FEI Number: 59-1470214 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

FREDERICK, LESLEY A
1800 SE ST LUCE BLVD
STUART, FL 34996 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

OFFICERS AND DIRECTORS:

Title: SDP () Delete
Name: TWINERS, SANDY
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

Title: 1VP () Delete
Name: SCLAFANI, PAUL
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

Title: 2VPD () Delete
Name: CONKLING, ANNE RAY
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

Title: T () Delete
Name: EVANS, CHUCK
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

Title: VD () Delete
Name: CARLSON, MARGARET
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: TULLNERS, SANDY
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

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

Title: 2VPD (X) Change () Addition
Name: CONKLING, ANNE RAE
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

Title: T (X) Change () Addition
Name: MACKEY, ALICE
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

Title: SD (X) Change () Addition
Name: CARLSON, MARGARET
Address: 1800 SE ST LUCIE BLVD
City-St-Zip: STUART, FL 34996

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDY TULLNERS

PD

01/06/2004

Electronic Signature of Signing Officer or Director

Date