2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2004 8:00 am
Secretary of State
05-05-2004 90202 050 ****61.25

DOCUMENT # 745534

1. Entity Name
CORDOVA GARDENS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4370 S. TAMIAMI TRAIL STE 156 SARASOTA, FL 34231 US	4370 S. TAMIAMI TRAIL STE 156 SARASOTA, FL 34231 US

04142004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
	Casey Management
Suite, Apt. #, etc. 2212 Bahia Vista	Suite, Apt. #, etc. 4370 S. Tamiami Tr. #156
City & State Sarasota, FL	City & State Sarasota, FL
Zip / Country 34239 / USA	Zip / Country 34231 / USA

4. FEI Number
59-2064066
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CASEY CONDOMINIUM MGMT. 4370 S TAMIAMI TRAIL STE 156 SARASOTA, FL 34231	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 _____ ANN SEABURG, LCAM 4-23-04
Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent's signature required when mailed or hand-delivered.) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD DANGLER, PAUL 2208 BAHIA VISTA ST F4 SARASOTA, FL 34239	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VPD SOLVERSON, SARAH 2204 BAHIA VISTA ST B SARASOTA, FL 34239	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PARLANE, REID 2208 BAHIA VISTA ST F3 SARASOTA, FL 34239	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD MURRAY, SUZANNE 2204 BAHIA VISTA D6 SARASOTA, FL 34239	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Emanuelli, Sophia 2228 Bahia Vista St. C-5 ~~Sarasota, FL 34239~~	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: Paul J. Dangler PRESIDENT 4-26-04
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Signature capacity