2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # 746427  1. Entity Name							Secretary of State				
THE FOUL		NS CONDOMINIUM NC.	I ASSO	CIATION OF							
Principal Place	e of Busines:	Mailing Address									
4 SEASONS 3799 S. BAN COCOA BEA US	IANA RIVEI	4 SEASONS CONDOMINIUM ASSOCIATION, IN 3799 S. BANANA RIVER BLVD. COCOA BEACH FL 32931 US									
2. Principal Place of Business			3. Mailing Address								
Suite, Apt #, etc.			Suite, Apt. #, etc.				MOORE	CR2E03	37 (11/03)		
City & State			City & State				4. FEI Number	59-1978855		Not	plied For Applicable
Zíp	Country		Zip		Cor	ıntry		of Status Desired		\$8.75 Addi Fee Required	
	6. Name	legistered	Agent		Name	7. Name and	Address of New R	egistered	Agent		
SOILEAU, JOHN (ATTY) 1970 MICHIGAN AVE, BLDG C P O BOX 236007 COCOA FL 32923							(P.O. Box Number	r is Not Acceptable	)		
COC	JOA FL 3				City			FI	Z <sub>i</sub> p Code	}	
	tions of regis	ly submits this statement for tered agent.				ed office or regist		n, in the State of Flo	rida, I arr	familiar with,	and accept
				9. Election Car			\$5.00 May Be	Ma		k Payable	to
FILE NOW: FEE IS \$61.25 Due By May 1, 2004				Trust Fund Contribution.			Added to Fees			rtment of S	
10.	71-5	OFFICERS AND DIRE	ECTORS		11.		ADDITIONS/CHA	NGES TO OFFICE	RS AND D		
TITLE NAME STREET ADDRESS GITY-ST-ZIP	3799 S BA	5, CARLTON NNANA RIVER BLVD 912 EACH FL 32931	☐ Delete		}	ş	U0000004 02/09/04-80	10910 1066-0	□ Change 18 61.25	Addition	
NAME STREET ADDRESS CITY-ST-ZIP	1	, DON MANA RIVER BLVD #101 EACH FL 32931	17	☐ Defete	•	i i				Change Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	}	L, RON NANA RIVER BLVD #101 BEACH FL 32931	14	☐ Delete	- 1	1				☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	3799 S BA	N, CLAUDIA ANANA RIVER BLVD, #80 BEACH FL 32931	96	☐ Belete		- }				☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY -ST-ZIP	3799 S BA	LORRAINE ANANA RIVER BLVD, #80 BEACH FL 32931	)4	□ Delete		1				Change	Addition
NAME STREET ADDRESS CITY- ST- ZIP				☐ Delete	CIT	AE EET ADDRESS Y-ST-ZIP			_	☐ Change	Addition
12. I hereby indicated of the co-	certify that the control of the cont	ne information supplied with ort or supplemental report is the receiver or trustee empo tachment with an address, w	this filing true and a wered to with all oth	does not qualify for accurate and that execute this report er like empowered	or the exemple as required to the contract of	emption stated in sture shall have th ired by Chapter 6	Section 119.07(3)( ne same legal effect 17, Florida Statute	i), Florida Statutes, it as if made under s; and that my nam	I further o oath; that e appears	artify that the it I am an officer I in Block 10 or	nformation or director r Block 11 if

**FILED** 

SIGNATURE: Church P. Hannier, President Board of Director Jan 30 2004,