

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748103

**FILED
Apr 01, 2004
Secretary of State**

Entity Name: EASTWOOD SHORES TOWNHOMES ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-1924563 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 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: SD () Delete
Name: MARTIN, LINDA
Address: 3423 PINE CONE CIRCLE
City-St-Zip: CLEARWATER, FL 33760

Title: VD () Delete
Name: KAVAL, RAYMOND G
Address: 3711 PINE CONE CIRCLE
City-St-Zip: CLEARWATER, FL 33760

Title: PD () Delete
Name: RUSSELL, SUSAN P
Address: 3501 PINE CONE CIRCLE
City-St-Zip: CLEARWATER, FL 33760

Title: TD () Delete
Name: FORD, PATRICIA A
Address: 3213 PINE CONE CIRCLE
City-St-Zip: CLEARWATER, FL 33760

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VPD (X) Change () Addition
Name: KAVAL, RAYMOND G
Address: 3711 PINE CONE CIRCLE
City-St-Zip: CLEARWATER, FL 33760

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

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

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: SUSAN RUSSELL

PD

04/01/2004

Electronic Signature of Signing Officer or Director

Date