


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 19, 2004 08:00 AM
Secretary of State

DOCUMENT # 752156 1. Entity Name FLORENTINE VILLAS CONDOMINIUM, INC.	
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Principal Place of Business 1020 SWALLOW AVENUE MARCO ISLAND, FL 33937-3238	Mailing Address 1020 SWALLOW AVENUE MARCO ISLAND, FL 33937-3238
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DO NOT WRITE IN THIS SPACE



02122004 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2780857	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

CONWAY, DOROTHY J
 1020 SWALLOW AVENUE 301
 MARCO ISLAND, FL 34145

DO NOT WRITE IN THIS SPACE

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signatures required when resigning.)

Filing Fee is \$61.25
Due by May 1, 2004

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

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD DZIEJMA, RAYMOND 1020 SWALLOW AVENUE MARCO ISLAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CONWAY, DOROTHY 1020 SWALLOW AVENUE MARCO ISLAND, FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD RUHL, DON 1020 SWALLOW AVE MARCO ISLAND, FL
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 02/20/04-80016-008 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(j), 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: *Dorothy J Conway* **2-14-04** **410-879-3760**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date - Daytime Phone #