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

## Apr 30, 2004 8:00 am Secretary of State **DOCUMENT # 756435** 1. Entity Name 04-30-2004 90268 029 \*\*\*\*61.25 SPICEWOOD VILLAGE PROPERTY OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 3715 GOLF ROAD 3715 GOLF ROAD 94076422 **BOYNTON BEACH FL 33436 BOYNTON BEACH FL 33436** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-2098934 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name\_\_ TENNYSON, ROD Street Address (P.O. Box Number is Not Acceptable) 1450 CENTER PARK BLVD. SUITE 100 WEST PALM BEACH FL 33401 City 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 Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. X Delete TITLE TITLE ☐ Change X Addition STD CONNELLY, ROBERT NAME NAME Testa, Edward 10798 SPICEWOOD TRAIL STREET ADDRESS STREET ADDRESS 10678 Spicewood Trail **BOYNTON BEACH FL 33436** CITY-ST-ZIP CITY-ST-ZIP Boynton Beach, FL. 33436 STD Addition Delete TITLE Change TITLE WOLFF, BETTE NAME NAME Wolff, Bette 107038 SPICEWOOD TRAIL STREET ADDRESS STREET ADDRESS 107038 Spicewood trail **BOYNTON BEACH FL 33436** CITY-ST-ZIP CITY-ST-ZIP Boynton Beach, FL. 33436 VD Change TITLE ☐ Delete TITLE Addition SCHMALZER, A.F. NAME NAME 10799 SPICEWOOD TRAIL STREET ADDRESS STREET ADDRESS **BOYNTON BEACH FL 33436** CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIE CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAMÉ NAME

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 true empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if of the corporation or the receiver or tru changed, or on an attachment with an s, with all other like empowered.

STREET ADDRESS CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

MING DEFICER OF DIRECTOR

A.F. Schmalzer April 19,2004 561-737-5100

**FILED**