2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#762728

FILED Mar 31, 2004 Secretary of State

Entity Name: DAV-MAR CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

214 CALLE MIRA MAR SARASOTA, FL 342343320

Current Mailing Address: New Mailing Address:

PO BOX 10714

BRADENTON, FL 34282 US

FEI Number: 59-2226475 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

MARONE, ROBERT ADI PROPERTY MANAGEMENT

570 57TH AVE WEST # 107 8051 N TAMIAMI

BRADENTON, FL 34207 US SUITE E-3

SARASOTA, FL 34243 US

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

in the State of Florida.

SIGNATURE: JAMES P FESTA 03/31/2004

Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

itle: AS () Delete Title: ASD (X) Change () Addition

 Name:
 MARONE, ROBERT
 Name:
 FESTA, JAMES

 Address:
 570 57TH AVE W, #107
 Address:
 8051 N TAMIAMI TRAIL

 City-St-Zip:
 BRADENTON, FL 34282
 City-St-Zip:
 SARASOTA, FL 34243

Title: STD (X) Delete Title: () Change () Addition

 Name:
 KOHLRIESER, ALLA
 Name:

 Address:
 214 CALLE MIRARMAR #1
 Address:

 City-St-Zip:
 SARASOTA, FL 34238
 City-St-Zip:

Title: PD () Delete Title: PD (X) Change () Addition

 Name:
 MOYNIBAN, JAMES
 Name:
 MOYNIHAN, JAMES

 Address:
 8857 MISTYCREEK DRIVE
 Address:
 8857 MISTYCREEK DRIVE

 City-St-Zip:
 SARASOTA, FL 34241
 City-St-Zip:
 SARASOTA, FL 34241

Title: D () Delete Title: S/T (X) Change () Addition

 Name:
 MOYNIHAN, SUSAN
 Name:
 MOYNIHAN, SUSAN

 Address:
 8857 MISTYCREEK DR
 Address:
 8857 MISTYCREEK DR

 City-St-Zip:
 SARASOTA, FL 34241
 City-St-Zip:
 SARASOTA, FL 34241

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: JAMES MOYNIHAN PD 03/31/2004