

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

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90084 045 ****61.25

DOCUMENT # 767362

1. Entity Name

**TOWNHOUSES BY THE SEA HOMEOWNERS
ASSOCIATION, INC**



Principal Place of Business

**206 WASHINGTONIA AVE
LAUDERDALE BY THE SEA FL 33308
US**

Mailing Address

**206 WASHINGTONIA AVE
LAUDERDALE BY THE SEA FL 33308
US**

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2369996

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**KOLOCAS, GREGORY
206 WASHINGTONIA AVE
LAUDERDALE BY THE SEA FL 33308**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**FILE NOW: FEE IS \$61.25
Due By May 1, 2004**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make Check Payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **D** ☐ Delete
NAME **MELCHIORE, GLORIA**
STREET ADDRESS **210 WASHINGTON AVE**
CITY-ST-ZIP **LAUDERDALE BY THE SEA FL**

TITLE **VPD** ☐ Delete
NAME **CORTEGUERA, H.J.**
STREET ADDRESS **204 WASHINGTON AVE**
CITY-ST-ZIP **LAUDERDALE BY THE SEA FL**

TITLE **S** ☒ Delete
NAME **CAREY, ELAINE**
STREET ADDRESS **208 WASHINGTONIA AVE.**
CITY-ST-ZIP **LAUDERDALE BY THE SEA FL**

TITLE **PD** ☐ Delete
NAME **ZIEBA, JOHN**
STREET ADDRESS **212 WASHINGTONIA AVE**
CITY-ST-ZIP **LAUDERDALE-BY-THE-SEA FL**

TITLE **T** ☐ Delete
NAME **KOLOCAS, GREGORY**
STREET ADDRESS **206 WAHSINGTON AVE**
CITY-ST-ZIP **LAUDERDALE BY THE SEA FL**

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **PD** ☒ Change ☐ Addition
NAME
STREET ADDRESS **210 Washington Ave**
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **204 Washington Ave**
CITY-ST-ZIP

TITLE **S** ☒ Change ☐ Addition
NAME **SPRANZ, BARRON**
STREET ADDRESS **208 WASHINGTONIA AVE**
CITY-ST-ZIP **LAUDERDALE BY THE SEA FL**

TITLE **D** ☒ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☒ Change ☐ Addition
NAME
STREET ADDRESS **206 Washington Ave**
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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 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:

Gregory Kolocas

1/22/04

954 771 0295

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #