

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2004
Secretary of State**

DOCUMENT# 770263

Entity Name: WORTH PROFESSIONAL PARK ASSOCIATION, INC.

Current Principal Place of Business:

3046 S. CONGRESS AVE
LAKE WORTH, FL 33461

New Principal Place of Business:

Current Mailing Address:

3046 S. CONGRESS AVE
LAKE WORTH, FL 33461

New Mailing Address:

FEI Number: 65-0122657 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

D'ANGIO, ROBERT A JR
685 ROYAL PALM BEACH BLVD
SUITE 205
ROYAL PALM BEACH, FL 33411 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: PD () Delete
Name: WEINER, ERIC M
Address: 3199 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL

Title: VD () Delete
Name: PISANI, ANTHONY
Address: 3199 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL

Title: T (X) Delete
Name: BARRAMEDA, JESUS
Address: 141 ALCAZAR ST.
City-St-Zip: ROYAL PALM BEACH, FL

Title: SD () Delete
Name: O'BRIEN, ROBERT
Address: 4620 LEE HWY, STE 202
City-St-Zip: ARLINGTON, VA

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change () Addition
Name: WEINER, ERIC M
Address: 3199 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL

Title: PD (X) Change () Addition
Name: PISANI, ANTHONY
Address: 3199 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL

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

Title: TD (X) Change () Addition
Name: O'BRIEN, ROBERT
Address: 4620 LEE HWY, STE 202
City-St-Zip: ARLINGTON, VA

Title: VD () Change (X) Addition
Name: ELPEDES, FELIX
Address: 3199 LAKE WORTH RD
City-St-Zip: LAKE WORTH, FL 33461

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: ROBERT O'BRIEN

D

04/28/2004

Electronic Signature of Signing Officer or Director

Date