

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

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

04-29-2004 90209 011 ****61.25

DOCUMENT # N00000000170

1. Entity Name

THE VILLAGES OF SAN MATEO MAINTENANCE
ASSOCIATION, INC.



Principal Place of Business

C/O CASTLE MANAGEMENT INC.
PO BOX 189013
PLANTATION FL 33318

Mailing Address

C/O CASTLE MANAGEMENT INC.
PO BOX 189013
PLANTATION FL 33318

34070540



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

65-0982595

Applied For

Not Applicable

Zip

Country

Zip

Country

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

CASTLE MANAGEMENT INC.
4450 W. SUNRISE BLVD
STE C-100
PLANTATION FL 33313

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD
NAME MILLS, MIKE ☐ Delete
STREET ADDRESS 2064 HACIENDA TERRACE
CITY-ST-ZIP WESTON FL

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

TITLE VD ☒ Delete
NAME TEDERS, MARK
STREET ADDRESS 2106 HACIENDA TERRACE
CITY-ST-ZIP WESTON FL

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

TITLE SD ☐ Delete
NAME SANS, GLORIA
STREET ADDRESS 2086 PASA VERDE LANE
CITY-ST-ZIP WESTON FL

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

TITLE D ☐ Delete
NAME HERNANDEZ, MARIA
STREET ADDRESS 2064 HACIERDA TERR
CITY-ST-ZIP WESTON FL 33327

TITLE ☒ Change ☐ Addition
NAME 2070 Hacienda Terrace
STREET ADDRESS Weston FL 33327
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D. Edwin McMahon
STREET ADDRESS 2096 Bahia Lane
CITY-ST-ZIP Weston, FL 33327

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☒ Addition
NAME D. April Elliot
STREET ADDRESS 2128 Pasa Verde Lane
CITY-ST-ZIP Weston, FL 33327

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:

Gloria Sans

4/12/04

Date

Daytime Phone #