

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004 08:00 AM
Secretary of State

DOCUMENT # N00000005580
 1. Entity Name
 TAYLOR VILLAGE OWNER'S ASSOCIATION, INC.



Principal Place of Business: 5401 TAYLOR RD, NAPLES, FL 34109
 Mailing Address: 5401 TAYLOR RD, NAPLES, FL 34109

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03102004 No Chg-NP CR2E037 (10/03)

4. FEI Number: 65-1035428 Applied For: Not Applicable
 5. Certificate of Status Desired: \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 OLSZEWSKI, LAURA S
 5401 TAYLOR RD
 STE 3
 NAPLES, FL 34109

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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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

Filing Fee is \$61.25 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. \$5.00 May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	D
NAME	OLSZEWSKI, LAURA S
STREET ADDRESS	5401 TAYLOR RD #3
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	D
NAME	THOMAS, LINDSEY J
STREET ADDRESS	5405 TAYLOR RD #5
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	D
NAME	TRACY, WILLIAM B
STREET ADDRESS	5405 TAYLOR RD #15
CITY-ST-ZIP	NAPLES, FL 34109
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: *[Signature]* 3/12/04 239-593-7070
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #