

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

04-30-2004 90307 043 ****61.25
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FILED

04 JUN -3 AM 11:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N01000000428

1. Entity Name
ANDALUCIA AT MIZNER COUNTRY CLUB NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business: 16450 ONE MILE ROAD (LYONS) DELRAY BEACH FL 33446

Mailing Address: 3109 PHILMONT AVENUE HUNTINGDON VALLEY PA 19006

2. Principal Place of Business: 16102 Mizner Club Drive

3. Mailing Address: 96 Campbell Property Management
Suite, Apt. #, etc. 1215 E Hillsboro Blvd

City & State: Delray Beach FL

City & State: Deerfield Beach, FL

Zip: 33446 Country: Palm Beach

Zip: 33441 Country: BROWARD

MOORE CR2E037 (11/03)

4. FEI Number: 26-0027203 Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

8. Name and Address of Current Registered Agent
C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

7. Name and Address of New Registered Agent
Campbell Property Management
1215 E Hillsboro Blvd
Deerfield Beach, FL 33441

9. 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: Brian Tight (Property Manager) Rita 4/28/2004

Signature, typed or printed name of registered agent and file if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FIRE NOW FEE IS \$125 Title By May 1, 2004

10. 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 NAME STREET ADDRESS CITY - ST - ZIP	PD DONNELLY, MICHAEL 5300 WEST ATLANTIC AVENUE #300 DELRAY BEACH FL 33484 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition 700037811387 06/09/04--01065--025 **61.25
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VTD PEASE, JOSEPH 5300 WEST ATLANTIC AVENUE #300 DELRAY BEACH FL 33484 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD ALEXANDER, JEFFREY 5300 WEST ATLANTIC AVENUE #300 DELRAY BEACH FL 33484 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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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)(l), 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] (Pease) 4-27-04 561 638 4030

Signature and typed or printed name of signing officer or director. Date Daytime Phone #