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

changed, or on an attachment with an address, with all other like empowered.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

## Feb 06, 2004 8:00 am Secretary of State DOCUMENT # N01000000679 1. Entity Name 02-06-2004 90013 026 \*\*\*\*61.25 HAWAIIAN ISLES HOMEOWNERS' ASSOC., INC. Mailing Address Principal Place of Business 4120 COCKROACH BAY RD., LOT 57 4120 COCKROACH BAY RD., LOT 45 94010725 RUSKIN FL 33570 RUSKIN FL 33570 2. Principal Place of Business 3. Mailing Address 4120 COCKROACH BAY RD Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) 40T45 City & State City & State Applied For 4. FEI Number 59-2661634 Not Applicable RUSKIN Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 33570 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REGAL, ALLEN Street Address (P.O. Box Number is Not Acceptable) 4120 COCHROACH BAY LOT 45 RUSKIN FL 33570 City 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 DATE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2004 Trust Fund Contribution. Added to Fees Florida Department of State OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change ☐ Addition SIMMONS, ROBERT A NAME NAME 4120 COCKROACH BAY RD LOT #106 STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP GOMOLL, NELSON K. PChange 4120 COCKROACH BAYRD LOT 58 TITLE ☐ Delete TITLE Addition GOMELC, NELSON K NAME NAME 4120 COCKROACH BAY STREET ADDRESS STREET ADDRESS RUSKIN FL. 33570 RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP DΛ Delete TITI F ■ Addition TITLE Change MILLER, CARSON NAME NAME 4120 COCKROACH BAY-LOT 51 STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP BERTRAM GEORGE W Change 1 4120 COCKROACH BAY RD LOT 49 RUSKIN FL 33570 ロナ Delete TITLE WILLIAMS, IDA NAME 4120 COCKROACH BAY #191 STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE REGAL, ALLEN NAME NAME 4120 COCKROACH BAY #45 STREET ADDRESS STREET ADDRESS RUSKIN FL 33570 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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

**FILED** 

Daytime Phone #