

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 28, 2005
Secretary of State**

DOCUMENT# N02000008413

Entity Name: CAPTAIN'S COVE OF INDIAN SHORES CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

19811 GULF BLVD
INDIAN SHORES, FL 33785

New Principal Place of Business:

Current Mailing Address:

19811 GULF BLVD
INDIAN SHORES, FL 33785

New Mailing Address:

FEI Number: 05-0541278 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SMITH, WILLIAM F
19534 GULF BLVD
202
INDIAN SHORES, FL 33785 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: SEITZ, ROBERT
Address: 23460 WEST PARK COLUMBO
City-St-Zip: CALABASSAS, CA 91302

Title: V () Delete
Name: PAGE, STEPHEN J
Address: 20001 GULF BLVD SUITE 5
City-St-Zip: INDIAN SHORES, FL 33785

Title: TD () Delete
Name: ALBAND, MICHAEL
Address: 19811 GULF BLVD #208
City-St-Zip: INDIAN SHORES, FL 33785

Title: SD (X) Delete
Name: GUDAHL, DIANE
Address: 2112 SEYMOUR AVENUE
City-St-Zip: CHEYENNE, WY 82001

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: BISHOP, DON
Address: 18222 CLEAR LAKE DRIVE
City-St-Zip: LUTZ, FL 33548

Title: SD (X) Change () Addition
Name: GUDAHL, DIANE
Address: 2112 SEYMOUR AVENUE
City-St-Zip: CHEYENNE, WY 82001

Title: PD (X) Change () Addition
Name: ALBAND, MICHAEL
Address: 19811 GULF BLVD #208
City-St-Zip: INDIAN SHORES, FL 33785

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

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: MICHAEL ALBAND

PD

04/28/2005

Electronic Signature of Signing Officer or Director

Date