
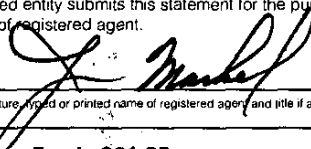
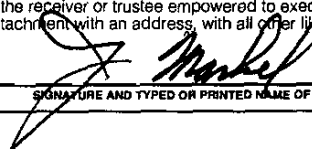


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90220 038 ****61.25

14010281

DOCUMENT # N08271 1. Entity Name BRADEN WOODS PHASE V HOMEOWNERS'S ASSOCIATION, INC.			
Principal Place of Business 748 SO. TAMIAMI TR. OSPREY, FL 34229 US		Mailing Address P O BOX 914 OSPREY, FL 34229 US	
2. Principal Place of Business Progressive Community Mgmt, Inc Suite, Apt. #, etc. 1801 Glengary Street City & State Sarasota, FL Zip 34231 Country USA		3. Mailing Address Progressive Community Mgmt, Inc Suite, Apt. #, etc. 1801 Glengary Street City & State Sarasota, FL Zip 34231 Country USA	
4. FEI Number 59-2520653		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent MANASOTA MANAGAMENT 748 SO. TAMIAMI TR OSPREY, FL 34229		7. Name and Address of New Registered Agent Name Progressive Community Management, Inc Street Address (P.O. Box Number is Not Acceptable) 1801 Glengary Street City Sarasota FL Zip Code 34231	
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 		Jim Markel DATE 4/15/04	
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
		\$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	TD HALLORAN, RICK 6016 91ST ST E BRADENTON, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Markel, Jim 1801 Glengary Street Sarasota, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D SARTIN, JAMES JR 9002 63RD AVE E BRADENTON, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BRAND, RAY 9014 59TH AVE E BRADENTON, FL 34202	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT Sutton, William 1801 Glengary Street Sarasota, FL 34231
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD DAVIS, BRETT 223 HIDDEN PONY OSPREY, FL 34229	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input type="checkbox"/> Addition <input type="checkbox"/>
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: 		4/15/04 941-921-5393	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #	