

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Aug 18, 2004 8:00 am**  
**Secretary of State**

08-18-2004 90002 026 \*\*\*61.25

**DOCUMENT # N12489**

1. Entity Name  
**THE COACH HOMES AT MARINERS' VILLAGE  
CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

PO BOX 568846  
ORLANDO, FL 32856 US

Mailing Address

PO BOX 568846  
ORLANDO, FL 32856 US

04000075



05272004 No Chg-NP

CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number  
**59-2775739**

Applied For  
Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

**Walters, Pamela R**  
WALTER, PAMELA R  
87 WEST MICHIGAN STREET  
ORLANDO, FL 32801

**DO NOT WRITE  
IN THIS SPACE**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

**Filing Fee is \$61.25  
Due by September 8, 2004**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE D  
NAME HAMILTON, ROBERT JR  
STREET ADDRESS 4806-3 COACHMAN'S DR  
CITY-ST-ZIP ORLANDO, FL **CHARIE HERRIN PRES. 2259-4 COACH HOUSE ORLANDO, FL. 32812**

TITLE PD  
NAME HAMILTON, ROBERT, III  
STREET ADDRESS 4700-9 BUGGY WHIP LANE  
CITY-ST-ZIP ORLANDO, FL **DIRECTOR 32812**

TITLE D  
NAME HORN, MAY  
STREET ADDRESS 4813-9 COACHMANS DR.  
CITY-ST-ZIP ORLANDO, FL 32812 **SECRETARY**

TITLE SD  
NAME MONELL, MIKE  
STREET ADDRESS 2418 S COACH HOSE BLVD  
CITY-ST-ZIP ORLANDO, FL **DIRECTOR 32806 32812**

TITLE D  
NAME FREEMAN, WILLIAM  
STREET ADDRESS 2211-2 COACH HOUSE BLVD  
CITY-ST-ZIP ORLANDO, FL **VICE PRESIDENT 32812**

TITLE D  
NAME GUZMAN, MIRIAM  
STREET ADDRESS 4813-3 COACHMAN'S DR  
CITY-ST-ZIP ORLANDO, FL **DIANE HAWKINS PRES 2392-2 BRIDE PATH ORLANDO, FL. 32812**

**DO NOT WRITE  
IN THIS SPACE**

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:**

**Cherie Herrin** Cherie Herrin

Date

8/11/04 401277 0972

Daytime Phone #