2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 01, 2005
Secretary of State

DOCUMENT# N12492

Entity Name: SOUTH RIVER VILLAGE FIVE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

30 SW SOUTH RIVER DR
STUART, FL 34997 US

New Principal Place of Business:

Current Mailing Address:

30 SW SOUTH RIVER DR
STUART, FL 34997 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BECKER & POLIAKOFF, PA
500 AUSTRALIAN AVE S
9TH FLOOR
WEST PALM BEACH, FL 33470 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: TD ( ) Delete
Name: O'NEIL, JOSEPH
Address: 711 SW SOUTH RIVER DR., #105
City-St-Zip: STUART, FL 34997

Title: ASD ( ) Delete
Name: GALASSI, SAMUEL
Address: 841 SW SOUTH RIVER DR., #105
City-St-Zip: STUART, FL 34997

Title: PD ( ) Delete
Name: COUCHON, PHIL
Address: 911 SW SOUTH RIVER DR. 105
City-St-Zip: STUART, FL 34997

Title: VD ( ) Delete
Name: BEWICK, JOHN
Address: 911 SW SOUTH RIVE DR., #102
City-St-Zip: STUART, FL 34997

Title: SD ( ) Delete
Name: DOERR, FRANK
Address: 811 SW SOUTH RIVER DR., #102
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change ( ) Addition
Name: COUCHON, PHILIP
Address: 911 SW SOUTH RIVER DR. 105
City-St-Zip: STUART, FL 34997

Title: VPD (X) Change ( ) Addition
Name: BEWICK, JOHN
Address: 911 SW SOUTH RIVE DR., #102
City-St-Zip: STUART, FL 34997

Title: PD (X) Change ( ) Addition
Name: MILANO, ANTHONY
Address: 841 SW SOUTH RIVER DR., #104
City-St-Zip: STUART, FL 34997

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: ANTHONY MILANO PD 03/01/2005
Electronic Signature of Signing Officer or Director — Date