

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 16, 2004
Secretary of State**

DOCUMENT# N26533

Entity Name: INTERSTATE PARK 78 PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

New Principal Place of Business:

10501 6 MILE CYPRESS PKWY
STE 107
FT. MYERS, FL 33912 US

Current Mailing Address:

New Mailing Address:

10501 SIX MILE CYPRESS
107
FORT MYERS, FL 33912 US

FEI Number: 65-0119355 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

Name and Address of New Registered Agent:

DAWSON, TERRI
10501 6 MILE CYPRESS PKWY
STE 107
FT. MYERS, FL 33912 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: STATES, JOHN E.,
Address: 10501 6 MILE CYPRESS PKWY #107
City-St-Zip: FT. MYERS, FL

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

Title: D () Delete
Name: STATES, E. D
Address: 10501 SIX MILE CYPRESS PKWY, #107
City-St-Zip: FT MYERS, FL

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

Title: D () Delete
Name: DAWSON, TERRI
Address: 10501 6 MILE CYPRESS PKWY #107
City-St-Zip: FT. MYERS, FL

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

Title: D () Delete
Name: SHIVELY, KIMBERLY J
Address: 10501 SIX MILE CYPRESS PKWY #107
City-St-Zip: FORT MYERS, FL 33912

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: TERRI DAWSON

D

03/16/2004

Electronic Signature of Signing Officer or Director

_____ Date