## 2004 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

SIGNATURE:

TLUBETARY OF STATE VISION OF CORPORATION. DOCUMENT # N35982 1. Entity Name 04 JUL -9 AM 10: 16 PALM COVE GOLF & YACHT CLUB COMMUNITY ASSOCIATION, INC. Principal Place of Business Mailing Address 3103 PHILMONT AVE 700 SW MAP ROAD PALM CITY, FL 34990 US **HUNTINGDON VALLEY, PA 19006** US 2. Principal Place of Business 3. Mailing Address 755 SW Mapp Road Suite, Apt. #, etc. Suite, Apt. #, etc. 06292004 CR2E037 (10/03) Chg-NP 4. FEI Number 65-0224087 Applied For City & State City & State Not Applicable Palm City, FI Country \$8.75 Additional Country Zip KK 5. Certificate of Status Desired Fee Required 34990 USA 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name PATRICIA KIMBALL FLETCHER, P.A. Street Address (P.O. Box Number is Not Acceptable) 200 SOUTH BISCAYNE BLVD. **SUITE 3400** MIAMI, FL 33131 Zip Code 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 DATE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make check payable to 9. Election Campaign Financing \$5.00 May Be Florida Department of State Amended AR is \$61.25 Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. V/D TITLE ☐ Delete TITLE NAME FERNANDEZ, ROBELIO NAME Fernandez, Rogelio STREET ADDRESS 700 SW.MAPO RD. STREET ADDRESS 755 SW Mapp Road, Palm City, FL 34990 CITY-ST-ZIP CITY-ST-ZIP PALM CITY, FL 34990 P/D VD TITLE **KK**Delete TITLE Change XIX Addition BLACKWELL BARRY NAME NAME Cameron, Clay STREET ADDRESS 700 SW MAP ROAD STREET ADDRESS 755 SW Mapp Road, Palm City, FL 34990 PALM CITY, FL 34990 CITY-ST-ZIP CITY - ST - ZiP STD TITI F Change **K**Addition TITLE ZZ Delete HARTMAN, REID \* NAME Charlton, Richard NAME STREET ADDRESS 700 SW MAP ROAD STREET ADDRESS 755 SW Mapp Road, Palm City, FL 34990 PALM CITY, FL 34990 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change TITLE ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 000039313420 TITLE ☐ Delete TITLE NAME NAME 07/19/04--01081--001 \*\*70.00 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY - ST - ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

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