


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 09, 2004 08:00 AM
Secretary of State

DOCUMENT # N40780 1. Entity Name THE NORTH SPRINGS COURT ASSOCIATION, INC.	
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Principal Place of Business % SUNRAE MANAGEMENT SERVICES INC 7071 WEST COMMERCIAL BLVD SUITE 2B TAMARAC, FL 33319	Mailing Address % SUNRAE MANAGEMENT SERVICES INC 7071 WEST COMMERCIAL BLVD SUITE 2B TAMARAC, FL 33319
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DO NOT WRITE IN THIS SPACE



01202004 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0240086	Applied For Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent SUNRAE MANAGEMENT SERVICES, INC % SUNRAE MANAGEMENT SERVICES INC 7071 WEST COMMERCIAL BLVD TAMARAC, FL 33319	DO NOT WRITE IN THIS SPACE
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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 May 1, 2004	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000042805 02/10/04-80040-004 61.25
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D FRANCIS, JAMES 9770 NW 47TH DRIVE CORAL SPRINGS, FL 33076
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D KOBRI, ARTHUR 9760 N.W. 47TH DR. CORAL SPRINGS, FL 33076
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD MELNICK, STEPHEN 9915 N.W. 47TH STREET CORAL SPRINGS, FL 33076
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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)(f), 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: Stephen Melnick **2/4/04** **954-962-7284**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR