

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42374

FILED  
Apr 28, 2004  
Secretary of State

**Entity Name:** TERRA MAR ISLAND CIVIC ASSOCIATION, INC.

**Current Principal Place of Business:**

1500 W. TERRA MAR DR.  
POMPANO BEACH, FL 33062

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2584  
POMPANO BEACH, FL 33072

**New Mailing Address:**

P.O. BOX 610585  
POMPANO BEACH, FL 33061

**FEI Number:** 65-0275559

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

OMER, FERHAT F  
1500 W. TERRA MAR DR.  
POMPANO BEACH, FL 33062 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: P ( ) Delete  
Name: KITTEN, CASHMAN  
Address: 1941 W. TERRA MAR ST  
City-St-Zip: POMPANO BEACH, FL 33062

Title: VD ( ) Delete  
Name: MARIE, CHIARELLO  
Address: 1755 TERRA MAR ST  
City-St-Zip: POMPANO BEACH, FL 33062

Title: TD ( ) Delete  
Name: OMER, FERHAT  
Address: 1500 W. TERRA MAR DR.  
City-St-Zip: POMPANO BEACH, FL 33062

Title: SD ( ) Delete  
Name: SANDI, DOXERY  
Address: 1901 W. TERRA MAR ST  
City-St-Zip: POMPANO BEACH, FL 33062

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: VD (X) Change ( ) Addition  
Name: NORMA, ABRAHAM  
Address: 3231 S. TERRA MAR DR.  
City-St-Zip: POMPANO BEACH, FL 33062

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

Title: SD (X) Change ( ) Addition  
Name: SANDI, DOXEY  
Address: 1901 W. TERRA MAR ST  
City-St-Zip: POMPANO BEACH, FL 33062

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: FERHAT F. OMER

TD

04/28/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date