

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 03, 2005 8:00 am
Secretary of State

05-03-2005 90082 046 ****61.25

DOCUMENT # N47584 1. Entity Name EGRET LANDING PROPERTY OWNERS' ASSOCIATION, INC.	
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Principal Place of Business 1059 LAKESHORE DR JUPITER, FL 33458 US	Mailing Address 1059 LAKESHORE DR JUPITER, FL 33458 US
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DO NOT WRITE IN THIS SPACE

40078405



04132005 No Chg-NP CR2E037 (10/03)

4. FEI Number 65-0387223	Applied For Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent GELFAND, MICHAEL J ESQ C/O GELFAND & ARIE, PA 205 S AUSTRALIAN AVE, STE 1010 WEST PALM BEACH, FL 33401-5014	DO NOT WRITE IN THIS SPACE
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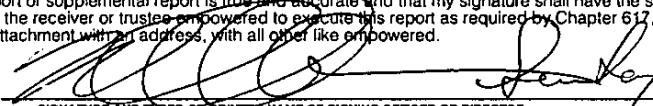
8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BEAUMIER, MICHAEL 510 PELICAN LANE N 510 Pelican Ln. North JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GATULLO, DIANE Marlene Olson 1070 LAKESHORE DR 388 Mahogany Pt JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BEAUMIER, MICHAEL Wayne Cheeseman 510 PELICAN LANE NO. 279 Swan Lane JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CROTTY, KYLE Joseph Bensler 572 SAWGRASS POINT 580 Scrubjay Ln. JUPITER, FL 33458
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RANKOW, DAN 234 SPARROW POINT JUPITER, FL 33458
TITLE NAME STREET ADDRESS 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.

SIGNATURE:  **4/25/05**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #