2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2004
Secretary of State

DOCUMENT# N47804

Entity Name: NORTH ANDREWS NEIGHBORHOOD ASSOCIATION INC.

Current Principal Place of Business:

169 NORTHWEST 44TH STREET
SUITE 6
FT. LAUDERDALE, FL 33309

New Principal Place of Business:

Current Mailing Address:

169 NORTHWEST 44TH STREET
SUITE 6
FT. LAUDERDALE, FL 33309

New Mailing Address:

FEI Number: 65-0330925 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FILKINS, ERIC CPA
75 NE 44TH STREET
STE 7
FORT LAUDERDALE, FL 33334 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: VP ( ) Delete
Name: CLOTHIER, KRISTINA
Address: 550 NE 59 CT
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: P ( ) Delete
Name: HORAWITZ, MARK
Address: 71 NE 48 CT
City-St-Zip: FT. LAUDERDALE, FL 33334

Title: D ( ) Delete
Name: SMITH, SHARRYN
Address: 160 NW 47 ST
City-St-Zip: FORT LAUDERDALE, FL 33309

Title: D ( ) Delete
Name: DEFELICE, LINDA
Address: 4509 NW 5TH AVE.
City-St-Zip: FT LAUDERDALE, FL 33309

Title: D ( ) Delete
Name: BOWMAN, JOE
Address: 631 NE 56 CT
City-St-Zip: FORT LAUDERDALE, FL 33334

Title: D ( ) Delete
Name: GERRITY, CATHY
Address: 5661 NE G AVE
City-St-Zip: FORT LAUDERDALE, FL 33334

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VP (X) Change ( ) Addition
Name: KOLES, DIANA
Address: 311 NW 54 STREET
City-St-Zip: FORT LAUDERDALE, FL 33309

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

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

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

Title: T (X) Change ( ) Addition
Name: ALBERTSON, KARL
Address: 1360 NE 47 COURT
City-St-Zip: OAKLAND PARK, FL 33334

Title: S (X) Change ( ) Addition
Name: BERGER, KATHY
Address: 5616 NE 2 TERRACE
City-St-Zip: FORT LAUDERDALE, FL 33334

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: KARL ALBERTSON T 04/20/2004

Electronic Signature of Signing Officer or Director — Date