

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 16, 2004  
Secretary of State**

DOCUMENT# N95000002514

Entity Name: DUNMORE HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2175 DUNMORE LN.  
VERO BEACH, FL 32963 US

**New Principal Place of Business:**

**Current Mailing Address:**

2175 DUNMORE LN.  
VERO BEACH, FL 32963 US

**New Mailing Address:**

FEI Number: 59-3443467      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

JOHN M. SEROVICH  
2175 DUNMORE LN.  
VERO BEACH, FL 32963 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: SD ( ) Delete  
Name: SEROVICH, AMY L  
Address: 2175 DUNMORE LN.  
City-St-Zip: VERO BEACH, FL 32963

Title: VPD ( ) Delete  
Name: WELLES, JAMES  
Address: 2180 DUNMORE LN.  
City-St-Zip: VERO BEACH, FL 32963

Title: PD ( ) Delete  
Name: SEROVICH, JOHN  
Address: 2175 DUNMORE LN.  
City-St-Zip: VERO BEACH, FL 32963

Title: TDD ( ) Delete  
Name: STEIN, JAMES  
Address: 2190 DUNMORE LN.  
City-St-Zip: VERO BEACH, FL 32963

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

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

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: JOHN M SEROVICH

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

PDD

04/16/2004

\_\_\_\_\_  
Date