

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 21, 2004 8:00 am
Secretary of State

04-21-2004 90060 027 ****61.25

DOCUMENT # N95000004298

1. Entity Name

**THE MIRAGE ON THE GULF CONDOMINIUM
ASSOCIATION, INC.**



Principal Place of Business

1070 S COLLIER BLVD
MARCO ISLAND FL 34145

Mailing Address

1070 S COLLIER BLVD
MARCO ISLAND FL 34145

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

~~WILL, JEFFERY J~~
~~233 N COLLIER BLVD~~
~~MARCO ISLAND FL 34145~~

Name Jamie B. Greusel
Street Address (P.O. Box Number is Not Acceptable)
1104 N. Collier Blvd.
City Marco Island FL Zip Code 34145

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

Jamie B. Greusel
Signature typed or printed name of registered agent and title if applicable.

JAMIE B GREUSEL

(NOTE: Registered Agent signature required when reinstating)

4-12-04

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FAILLA, JOHN 212 S. BRIDGE ST. YORKVILLE IL 60560	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEVINE, ELINOR R 171 GRAY ST AMHERST MA 01002	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST BERRY, BILL 1070 S COLLIER BLVD #805 MARCO ISLAND FL 34145	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Berry, Bill 1070 S Collier Blvd #805 Marco Island, Fl. 34145	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Irwin, John 1070 S Collier Blvd. #403 Marco Island, Fl. 34145	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T P. & henny, Dennis 1070 S. Collier Blvd #502 Marco Island, Fl. 34145	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Roeschen, Robert 1070 S. Collier Blvd. #705 Marco Island, Fl. 34145	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LaFato, Don 1070 S. Collier Blvd. #507 Marco Island, Fl. 34145	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

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:

W. Berry Pres.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #