

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 29, 2004
Secretary of State**

DOCUMENT# N96000003322

Entity Name: ST. ANDREWS VERANDAS III ASSOCIATION, INC.

Current Principal Place of Business:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 US

New Mailing Address:

FEI Number: 65-0680732 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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: VPD () Delete
Name: DIAMOND, DAN
Address: 26991 CLARKSTON DRIVE #8204
City-St-Zip: BONITA SPRINGS, FL 34135

Title: STD () Delete
Name: CONWAY, THOMAS
Address: 26961 CLARKTON #9104
City-St-Zip: BONITA SPRINGS, FL 34135

Title: D () Delete
Name: KRIVA, OTTO
Address: 26961 CLARKSTON DR., #9204
City-St-Zip: BONITA SPRINGS, FL

Title: PD () Delete
Name: SERGEANT, RON
Address: 26961 CLARKSTON DR., 9207
City-St-Zip: BONITA SPRINGS, FL 34135

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: D (X) Change () Addition
Name: IMPENS, JACK
Address: 6287 EDGEBROOK LANE EAST
City-St-Zip: INDIAN HEAD PARK, IL 60525

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

Title: D () Change (X) Addition
Name: GROH, ANTHONY
Address: 26931 CLARKSTON DRIVE, #10204
City-St-Zip: BONITA SPRINGS, FL 34135

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: RONALD SERGEANT

PD

04/29/2004

Electronic Signature of Signing Officer or Director

_____ Date