

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004798

FILED
Feb 06, 2004
Secretary of State**Entity Name:** FIELDSTREAM HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**882 JACKSON AVE.
WINTER PARK, FL 32789**New Principal Place of Business:****Current Mailing Address:**882 JACKSON AVE.
WINTER PARK, FL 32789**New Mailing Address:****FEI Number:** 59-3470140**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**DAVIS, MARC
882 JACKSON AVE.
WINTER PARK, FL 32789**Name and Address of New Registered Agent:**DAVIS, MARC P
882 JACKSON AVE.
WINTER PARK, FL 32789

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: MARC P. DAVIS

02/06/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: CAMILLERI, RONNI
Address: 619 FIELDSTREAM BLVD.
City-St-Zip: ORLANDO, FL 32825

Title: PD () Delete
Name: FORTNA, DAVID
Address: 10526 BRUUN PLACE
City-St-Zip: ORLANDO, FL 32825

Title: D () Delete
Name: FORTNA, DAVID
Address: 10526 BROWN PLACE
City-St-Zip: ORLANDO, FL 32825

Title: SD (X) Delete
Name: MELISE, THALIA
Address: 10551 ANGLER COURT
City-St-Zip: ORLANDO, FL 32825

Title: VD () Delete
Name: KAPF, GEORGE
Address: 10533 ANGLER COURT
City-St-Zip: ORLANDO, FL 32825

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

Title: SD (X) Change () Addition
Name: LORENZO, CARLOS
Address: 10513 BRUUN PLACE
City-St-Zip: ORLANDO, FL 32825

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: DAVID FORTNA

PD

02/06/2004

Electronic Signature of Signing Officer or Director

Date