

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

DOCUMENT# 762808

**FILED**  
**Jul 02, 2004**  
**Secretary of State****Entity Name:** 74 NORTH CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**74 N. GULF BLVD.  
1A  
INDIAN ROCKS BEACH, FL 33785 US**New Principal Place of Business:****Current Mailing Address:**19616 GULF BLVD  
402  
INDIAN ROCKS BEACH, FL 33785 US**New Mailing Address:**19616 GULF BLVD  
402  
INDIAN SHORES, FL 33785-235 US**FEI Number:** 59-2250795**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**JACOBSON, LANCE H  
19616 GULF BLVD #402  
INDIAN ROCKS BEACH, FL 33785**Name and Address of New Registered Agent:**SWANSON, MARY L  
19616 GULF BLVD #402  
INDIAN SHORES, FL 33785-235 US

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: MARY L. SWANSON

07/02/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: STUBBLEBINE, PEGGY  
Address: 74 GULF BLVD. 3-B  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: DV ( ) Delete  
Name: WILLIS, DON  
Address: 74 GULF BLVD 3A  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

Title: DT ( ) Delete  
Name: SWANSON, MARY  
Address: 19616 GULF BLVD #402  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785

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

Title: DP (X) Change ( ) Addition  
Name: STUMO, MARY  
Address: 74 GULF BLVD. 1-A  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

Title: DV (X) Change ( ) Addition  
Name: BARLIS, ARTHUR  
Address: 74 GULF BLVD 2-A  
City-St-Zip: INDIAN ROCKS BEACH, FL 33785 US

Title: DT (X) Change ( ) Addition  
Name: SWANSON, MARY  
Address: 19616 GULF BLVD #402  
City-St-Zip: INDIAN SHORES, FL 33785-235 US

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: MARY L. SWANSON

DT

07/02/2004

Electronic Signature of Signing Officer or Director

Date