2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Feb 24, 2005 8:00 am Secretary of State **DOCUMENT # 730592** 02-24-2005 90031 047 ****61.25 GEMINI CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 336 GOLFVIEW ROAD 336 GOLFVIEW ROAD NORTH PALM BEACH, FL 33408 NORTH PALM BEACH, FL 33408 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02082005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-1655240 Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 5. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name DANIELS BRUCE J 336 GOLFVIEW RD Street Address (P.O. Box Number is Not Acceptable) NORTH PALM BEACH, FL 33408 Zip Code 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 Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstitting) DATE 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Due by May 1, 2005 Florida Department of State Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE ☐ Delete TITLE E. Louise Reed -Secretary X Change ROLLER, JOHN NAME NAME 336 Golfview Road STREET ADDRESS 336 GOLFVIEW RD STREET ADDRESS North Palm Beach, Fl. 33408 CITY-ST-ZIP NORTH PALM BEACH, FL 33408 CITY-ST-ZIP Delete TITLÉ Frank Palumbo - Treasurer Change FISHER, EDWARD NAME 336 Golfview Road STREET ADDRESS 336 GOLFVIEW RD STREET ADORESS North Palm Beach, Fl. 33408 CITY-ST-ZIP NORTH PALM BEACH, FL 33408 CITY-ST-ZP TITLE ☐ Delete TITLE ☐ Change Addition 🖵 Robert Ward - Director NAME POWELL, ANN STREET ADDRESS 336 GOLFVIEW RD 336 Golfview Road STREET ADORESS CITY-ST-ZIP NORTH PALM BEACH, FL 33408 CITY-ST-ZIP North Palm Beach, Fl. 33408-

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 reculred 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 affine like empowered.

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADORESS

STREET ADDRESS

CITY-ST-7/P

CITY-ST-ZIP

CATY-ST-7IP

SIGNATURE:

TITD F

NAME

TITI F

STREET ADDRESS

STREET ADDRESS

CITY-ST-7IP

CTTY-ST-ZIP

WEIS, PAULINE

TD

STREET ADDRESS 336 GOLFVIEW RD

336 GOLFVIEW RD

REED, E. LOUISE

DANIELS, BRUCE

336 GOLFVIEW ROAD

N PALM BEACH, FL 33408

NORTH PALM BEACH, FL 33408

NORHT PALM BEACH, FL 33408

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

⊠ Delete

Delete

☐ Delete

2-21-05

561-626-3853

☐ Change

☐ Change

☐ Change

☐ Addition

■ Addition

☐ Addition

FILED