

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N47286

FILED
Mar 23, 2005
Secretary of State

Entity Name: FOUR WINDS MARINA NORTH CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

16501 STRINGFELLOW ROAD
BOKEELIA, FL 33922

New Principal Place of Business:

Current Mailing Address:

POB 622
BOKEELIA, FL 33922 US

New Mailing Address:

5509 PINE ISLAND RD NW
BOKEELIA, FL 33922 US

FEI Number: 65-0710394

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRAUND, SALLY
12185 HARRY ST
BOKEELIA, FL 33922 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: PD () Delete
Name: HAMILTON, RICHARD
Address: 5423 PINEDALE HEIGHTS
City-St-Zip: RAPID CITY, SD 57702

Title: VD () Delete
Name: DWAYNE, BLAIR
Address: 679 W. 24TH AVE
City-St-Zip: OKEECHOBEE, FL 34974

Title: D () Delete
Name: DOROUGH, JAMES JR
Address: 844 MALLARD COVE
City-St-Zip: HARRODSBURG, KY 40330

Title: D () Delete
Name: MARTIN, SHORT
Address: 21206 CR 561
City-St-Zip: CLERMONT, FL 34711

Title: STD () Delete
Name: POLICKY, DON
Address: HC PO BOX 868-35 17800 LITTLE ELK
City-St-Zip: PIEDMONT, SD 57769

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: DON POLICKY

STD

03/23/2005

Electronic Signature of Signing Officer or Director

Date