
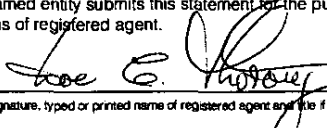
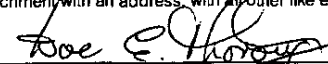


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 12, 2004 8:00 am
Secretary of State

01-12-2004 90017 004 ****61.25

DOCUMENT # 702793					
1. Entity Name ELLIOTT'S POINT CHANNEL ASSOCIATION, INC.					
Principal Place of Business 372 GARDNER DRIVE FT WALTON BCH, FL 32548			Mailing Address 372 GARDNER DRIVE FT WALTON BCH, FL 32548		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1803952	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
THOROUGH, DOE G. 372 GARDNER DRIVE FT. WALTON BEACH, FL 32548			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL 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 				DATE 1/7/04	
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input checked="" type="checkbox"/> Delete	TITLE	P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PALCIE, TOM		NAME	PALCIE TOM	
STREET ADDRESS	312 SUDDITH CIRCLE		STREET ADDRESS	312 SUDDITH CIR.	
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548		CITY-ST-ZIP	FORT WALTON BCH, FL. 32548	
TITLE	VP	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BASS, JOHN		NAME	BOURQUE, ART	
STREET ADDRESS	370 GARDNER DR NE		STREET ADDRESS	88 LAURIE DR.	
CITY-ST-ZIP	FT WALTON BEACH, FL		CITY-ST-ZIP	FT. WALTON BEACH, FL. 32548	
TITLE	S	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	THOROUGH, DOE G		NAME	ORR, WALT	
STREET ADDRESS	372 GARDNER DRIVE N.E.		STREET ADDRESS	308 SUDDITH CIR	
CITY-ST-ZIP	FORT WALTON BEACH, FL 32548		CITY-ST-ZIP	FT. WALTON BEACH, FL. 32548	
TITLE	T	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	THOROUGH, DOE G		NAME		
STREET ADDRESS	372 GARDNER DRIVE		STREET ADDRESS		
CITY-ST-ZIP	FT WALTON BEACH, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LUSSIER, ED		NAME		
STREET ADDRESS	382 GARDNER DRIVE		STREET ADDRESS		
CITY-ST-ZIP	FT WALTON BEACH, FL		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PIACENTE, GREG		NAME		
STREET ADDRESS	398 GARDNER DR		STREET ADDRESS		
CITY-ST-ZIP	FT WALTON BEACH, FL		CITY-ST-ZIP		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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 required 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 or other like empowered.					
SIGNATURE: 		DOE, G. THOROUGH		1/7/04 850-243-7036	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	

CHECK # 683 - DATED 1/7/04 ENCLOSED