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

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## **DOCUMENT # 706258**

SINGER ISLAND BUSINESS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1281 NORTH OCEAN DR

1281 NORTH OCEAN DR

STE 109

SINGER ISLAND, FL 33404 US

STE 109

SINGER ISLAND, FL 33404

**FILED** Jan 29, 2004 08:00 AM Secretary of State



01122004 No Chg-NP

\_ CR2E037 (10/03)

4. FEI Number 59-6159379

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

5. Name and Address of Current Registered Agent

STEWART, JAMES M. 1211 THE PLAZA SINGER ISLAND, FL 33404

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IN THIS SPACE

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	named entity submits this statement for the plions of registered agent.	ourpose of changing its registered office or registered agent, or b	oth, in the State of Florida. I am familiar with, and accept_
SIGNATURE_			
	Signature, typed or printed name of registered agent and title	If applicable. (NOTE Registered Agent signature required when reinstating)	DATE
	Filing Fee is \$61.25 Due by May 1, 2004	Election Campaign Financing \$5.00 May Be     Trust Fund Contribution.	
10.	OFFICERS AND DIREC	CTORS_	
TITLE NAME STREET ADDRESS GITY-ST-ZIP	DS ARMSTRONG, CHIP C\O SALFISH MARINA RESORT WEST PALM BEACH, FL 33404		
NAME STREET ADDRESS	D MOODY, GOLDIE 182 LAKE DR		······································

SINGER ISL, FL 33404 TITLE SUNDEEN, DEBBIE STREET ADDRESS 3800 N OCEAN DRIVE C3TY - ST - Z1P SINGER ISLAND, FL 33404 TELE NAME

STEWART, JAMES M 1211 THE PLAZA

CITY-ST-ZIP SINGER ISLAND, FL 33404 3333 F

NAME AMECHE, GAYLE STREET ADDRESS 206 INLET WAY CITY-ST-ZIP PALM BEACH SHORES, FL 33404

STREET ADDRESS

ถ MAME MOODY, JAMES STREET ADDRESS 182 LAKE DR

CITY-ST-ZIP SINGER ISLAND, FL 33404

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 of 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

**SIGNATURE**