

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 706258

FILED
Jul 19, 2004
Secretary of State**Entity Name:** SINGER ISLAND BUSINESS ASSOCIATION, INC.**Current Principal Place of Business:**1281 NORTH OCEAN DR
STE 109
SINGER ISLAND, FL 33404 US**New Principal Place of Business:****Current Mailing Address:**1281 NORTH OCEAN DR
STE 109
SINGER ISLAND, FL 33404 US**New Mailing Address:****FEI Number:** 59-6159379 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**STEWART, JAMES M.
1211 THE PLAZA
SINGER ISLAND, FL 33404 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:** DS () Delete
Name: ARMSTRONG, CHIP
Address: C/O SALFISH MARINA RESORT
City-St-Zip: WEST PALM BEACH, FL 33404**Title:** D () Delete
Name: MOODY, GOLDIE
Address: 182 LAKE DR
City-St-Zip: SINGER ISL, FL 33404**Title:** TD () Delete
Name: SUNDEEN, DEBBIE
Address: 3800 N OCEAN DRIVE
City-St-Zip: SINGER ISLAND, FL 33404**Title:** D () Delete
Name: STEWART, JAMES M
Address: 1211 THE PLAZA
City-St-Zip: SINGER ISLAND, FL 33404**Title:** P () Delete
Name: AMECHE, GAYLE
Address: 206 INLET WAY
City-St-Zip: PALM BEACH SHORES, FL 33404**Title:** D () Delete
Name: MOODY, JAMES
Address: 182 LAKE DR
City-St-Zip: SINGER ISLAND, FL 33404**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** TD (X) Change () Addition
Name: HAWTHORNE, TRISH
Address: 1200 EAST BLUE HERON BOULEVARD
City-St-Zip: SINGER ISLAND, FL 33404**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: JAMES M. STEWART, ESQ.

D

07/19/2004

Electronic Signature of Signing Officer or Director

Date