2004) 2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

changed, or on an attachment with an agdress, with all other like empowered

SIGNATURE:

the four for 2004, so an substituting it now. 04 OCT 22 AM 82 July & Toluen SECRETARY OF STAFFLEASURE DOCUMENT # 710984 1. Entity Name CARIBBEAN VILLAS ASSOCIATION, INC. Principal Place of Business Mailing Address 1730 CARIBBEAN CIRCLE 1730 CARIBBEAN CIRCLE VENICE FL 34293 VENICE FL 34293 2 Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite. Ant. #. etc. 4. FEI Number NOT APPLICABLE City & State City & State Applied For Not Applicable Zip Country Country Zio \$8.75 Additional Certificate of Status Desired \Box Fee Required 6-Name and Address of Current Registered Agent 7.- Name and Address of New Registered Agent -Name TOLMAN, JOHN S. Street Address (P.O. Box Number is Not Acceptable) 1730 CARRIBBEAN CIRCLE VENICE FL 34293 City 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 reinstating) DATE 9. Election Campaign Financing Make Check Payable to \$5.00 May Be FILE NOW: FEE IS \$61.25 Trust Fund Contribution. Florida Department of State Added to Fees 1、1994年,曾经约 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. PRESIDENT ☐ Delete TITE F TITLE ☐ Addition COLEMAN, MARGARET NAME NAME RICHARD SUMMORS 1735 CARI bleAN CIR 1523 LAKESIDE DR STREET ADDRESS STREET ADDRESS Venice, 71 34293 CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34293 VICE- Pries. MARCARET ColeMAP ☐ Delete X Change ☐ Addition SIMMONS, RICHARD NAME NAME 1523 LAKESIDE Dr. 1735 CARIBBEAN CIRCLE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP Verice 71 - 34293 VENICE FL 34293 CITY-ST-7IP-ADS SCCRETARY TITLE ☐ Delete TITLE Sd. Change ☐ Addition George KYLE WITOMSKI, DARLENE NAME NAME M37 CARIBBEAN CIR 723 CARIBBEAN CIR STREET ADDRESS STREET ADORESS vence, 71 34293 CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34293 SCERETARY GEORGE KYLO TITLE Delete TITLE Change Change ☐ Addition WITOMSKI, DARLENE NAME NAME 1237 CARIBBEANCIR STREET ADDRESS 723 CARIBBEAN CIR. STREET ADDRESS CITY-ST-7/P City-St-7iP VENICE FL 34293 Verice +1 34293 ☐ Delete TITLE ☐ Change TITLE tolman, John NAME NAME 900042103749 STREET ADDRESS 1730 CARIBBEAN CIRCLE STREET ADDRESS 40/22/04--01035--011 CITY-ST-ZIP CITY-ST-ZIP VENICE FL 34293 ASSIST TREAS. AT TITLE -. Delete ☐ Addition NECNIE EDSOP LIDDY, LORINE NAME ÑAME 1753 CARILLEAN CIR 1752 CARIBBEAN CIRCLE STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP VENICE FL 34293 Venico, 71 3420 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 required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if