## 2005 NOT-FOR-PROFIT CORPORATION

## Apr 26, 2005 8:00 am Secretary of State ANNUAL REPORT DOCUMENT # 713290 04-26-2005 90144 004 \*\*\*\*61.25 1. Entity Name ALDÉA MAR CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 500 S: PARK-BLVD-1162 INDIAN HILLS BLVD STE 223 VENICE, FL 34293 VENICE, FL-34285 2. Principal Place of Business 3. Mailing Address KEYS-CALDWELL, INC. KEYS-CALDWELL, INC. 11621NDIAN HILLS BLVD. STI 62 INDIAN HILLS BLVD 01242005 CR2E037 (10/03) VENICE, FL 34293 WENICE, FL 34293 Applied For 4. FEI Number 59-1511424 Not Applicable Zip \$8.75 Additional 5. Certificate of Status Desired П Fee.Required\_\_\_ 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name CALDWELL, ANNETTE K. 1162 INDIAN HILLS BLVD Street Address (P.O. Box Number is Not Acceptable) 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 Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Due by May 1, 2005 Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VD TITLE Delete Peter Noble 500 Park Blvd. S, #84 TITLE X Addition ☐ Change NAME WAGNER, WALT NAME 500 PARK BLVDS. # 90 STREET ADDRESS STREET ADDRESS Venice FL 34285 CITY-ST-ZIP VENICE, FL 34285 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition CEMOVICH, ROBERT NAME NAME STREET ADDRESS 500 PARK BLVD S # 92 STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285 CITY-ST-ZIP TITLE Delete TITLE □ Change ☐ Addition NAME ROCHEFORD, RALPH NAME STREET ADDRESS 500 PARK BLVD S #67 STREET ADDRESS CITY-ST-7IP VENICE, FL 34285 CITY-ST-ZIP TITLE ÞΩ ☐ Delete IIII F ☐ Change ■ Addition HARTNETT, JOHN NAME STREET ADDRESS 500 PARK BLVD S # 122 STREET ADDRESS VENICE, FL 34285 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition MCGOWEN, HELEN NAME NAME STREET ADDRESS 500 PARK BLVD S # 32 STREET ADDRESS CITY-ST-ZIP VENICE, FL 34285 CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ■ Addition STAGER, JACKSON NAME NAME STREET ADDRESS 500 PARK BLVD 26 STREET ADDRESS

fermation 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 supplier period 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 ecciver 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 the period of the property of the period 12. I hereby certify that the inform dicated on this report of of the corporation or the recei

CITY-ST-ZIP

SIGNATURE:

VENICE, FL 34285

RE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

FILED