2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 14, 2005 8:00 am
Secretary of State
02-14-2005 90043 027 ****61.25

DOCUMENT # 714809

1. Entity Name
BLOWING ROCK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1500 BEACH ROAD TEQUESTA, FL 33469	721 US HWY ONE SUITE 121 NORTH PALM BEACH, FL 33408 US

02042005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-2405765 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GILLESPIE, KENNETH 721 US HWY ONE SUITE 121 NORTH PALM BEACH, FL 33408	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 _____
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, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD BENSON, MARJORIE 1613 SOUTH DUFF AVENUE AMES, IA 50010	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD MARTHA M BENSON PO BOX 6030 Snowmass Village, CO 81615	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP VOLLMER, AVY 1500 BEACH ROAD #105 JUPITER, FL 33469	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AVP Jeffrey Kuehl 623 NORTHLAKE BLVD NORTH PALM BEACH, FL 33408	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD RIDDLE, TWYLA 9657 JUNIPER ST NW COON RAPIDS, MN 55433	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD KIRK ARMSTRONG 901 WAYLAND ARLINGTON, TX 76012	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 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 all other like empowered.

SIGNATURE: Martha Moore Benson, Pres. 2/11/05 970-309-3270
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #