## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Apr 14, 2004 8:00 am Secretary of State

		Secretary of State										
DOCUMENT # 719634  1. Entity Name SWIFTON VILLAS CONDOMINIUM ASSOCIATION, INC.									04-14-200	_		
Principal Place of Business 16 CHURCH ST OSPREY, FL 34229 US				Mailing Address 16 CHURCH ST OSPREY, FL 34229 US								
2. Principal Place of Business				3. Mailing Address								
Suite, Apt. #, etc.				Suite, Apt. #, etc.				01222004 C	hg-NP	CR2E03	37 (10/03)	
City & State				City & State				4. FEI Number Applied For 59-1382583 Not Applied able				
Zip		Country	Zi	Zip			5. Certificate of Status			CO 75 Additional		
	6. Name	and Address of Curre	ent Register	ed Agent				7. Name and Add	ress of New R	egistered A	Agent	
GROFF, HENRY SWIFTON VILLAS CONDO ASS. 16 CHURCH ST. OSPREY, FL 34229						Name Street	(1/e) Sedress (1/4)	Tienn Helling  Idress (P.O. Box Number is Not Acceptable)  VI Hon III as Condo assn.				
8. The above named entity submits this statement for the purpose of changing its re						City	Osprey			FL 323339		
8. The above	named entit	y submits this statemer	it for the purp	oose of changing its	register	ed office o	r register	ed agent, or both, in	the State of Flo	rida. I am t	amiliar with,	and accept
the obligations of registered agent.  SIGNATURE  Signature. Signature, typed or printed name of registered agent and title of applicable. (NOTE: Registered Agent signature required when reinstating)  DATE										104	· ·	
Filing Fee is \$61.25  Due by May 1, 2004  9. Election Campa Trust Fund Con								\$5.00 May Be Added to Fees			payable to	
10.		OFFICERS AND	DIRECTORS		11.		,	ADDITIONS/CHANG	ES TO OFFICER	RS AND DIF	RECTORS IN	10
TITLE NAME STREET ADDRESS CITY-ST-ZIP	!	HENRY FTON DR TA, FL 34231		□ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1	ZEL FTON DR 77 TA, FL 34231		☐ Delete			2923	el King 3 Swilton Dr asote F1. 30		,	Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TIDD, LEG 2851 SWI SARASO	FTON DR	د سپ مید به در	Delete			VPD Jue 286		•		☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BERENSO 2839 SWI	ON, SIMON FTON DR #23 TA, FL 34231		Delete	TITLI NAM STRE	E	5D Fran 2941	Valone Swiften Dr. 180tg, Fl. 340			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS LLYOD, K 16 CHUR OSPREY,	CH ST.		□ Delete			TD Glen 2839	n Heiling swiftmobr. asotq, F1.34d			☐ Change	Addition
TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP			,	☐ Delete				T			☐ 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 cath; 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNATURE OR DIRECTOR

GIENN HELITE

4/7/04

966-6844

Daytime Phone #