## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

## Mar 15, 2004 8:00 am Secretary of State **DOCUMENT # 719992** 1. Entity Name 03-15-2004 90094 005 \*\*\*\*61.25 WINDMILL VILLAGE BY THE SEA RECREATION CENTER ASSOCIATION, INC. Principal Place of Business Mailing Address 10850 S. OCEAN DR. 10851 S. OCEAN DR. JENSEN BEACH FL 34957 JENSEN BEACH FL 34957 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State Applied For 4. FEI Number 59-2391406 Not Applicable Zip Country Zin Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MILLER, LESTER = ---10851 S. OCEAN DR. #31 JENSEN BEACH FL 34957 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 Delete MILE TITLE Change ■ Addition MILLER, LESTER NAME NAME 10851 S. OCEAN DR., #31 STREET ADDRESS STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-ZIP CITY-ST-ZIP VPD TITLE ☐ Delete TITLE Change ☐ Addition VOSS, THOMAS NAME NAME 70 AQUA RA DRIVE STREET ADDRESS STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-ZIP CITY-ST-ZIP TITLE 7a. Delete TITLE Change Addition BLANCHARD, ED NAME NAME JEAN TOWNSOND 10851 S OCEAN DRIVE # 54 STREET ADDRESS STREET ADDRESS 10851 S. OCEAN DRIVE + JENSEN BEACH FL 34957 CITY-ST-ZIP CITY-ST-ZIP JENSEN BEACH FL 34957 DILE Delete TITLE ☐ Change ☐ Addition BRANN, ROBERT NAME NAME 107 AQUA RA DRIVE STREET ADDRESS STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change □ Addition TILLMAN, ANN NAME 10851 S OCEAN DRIVE #19 STREET ADDRESS STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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.

3/5/04

772-229-0911

**FILED**