

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 721366

FILED  
Jan 05, 2004  
Secretary of State

**Entity Name:** CONQUISTADOR CONDOMINIUM 11 ASSOCIATION, INC.

**Current Principal Place of Business:**

1800 SE ST. LUCIE BLVD  
CLUBHOUSE  
STUART, FL 34996

**New Principal Place of Business:**

**Current Mailing Address:**

1800 SE ST. LUCIE BLVD  
CLUBHOUSE  
STUART, FL 34996

**New Mailing Address:**

**FEI Number:** 59-1470216

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

FREDERICK, LESLEY  
1800 S E ST LUCIE BLVD  
STUART, FL 34996 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: SD ( ) Delete  
Name: EAST, MARILYNN  
Address: 1800 SE ST. LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: SD ( ) Delete  
Name: MCMILLAN, DAVID  
Address: 1800 SE ST. LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: PD ( ) Delete  
Name: HOPPER, JOE  
Address: 1800 SE ST LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: VP ( ) Delete  
Name: GARDINER, GENE  
Address: 1800 SE ST LUCIE BLVD  
City-St-Zip: STUART, FL 34996

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: TD (X) Change ( ) Addition  
Name: MCMILLAN, DAVID  
Address: 1800 SE ST. LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: PD (X) Change ( ) Addition  
Name: HOPPER, JOSEPH  
Address: 1800 SE ST LUCIE BLVD  
City-St-Zip: STUART, FL 34996

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JOSEPH HOPPER

PD

01/05/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date