

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


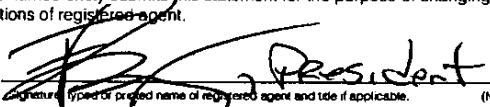
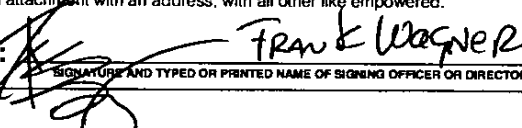
FILED
Apr 29, 2005 8:00 am
Secretary of State

04-29-2005 90264 009 ****61.25

14010042



04272005 Chg-NP CR2E037 (10/03)

DOCUMENT # 722802			
1. Entity Name ROTONDA SHORES CONSERVATION ASSOCIATION, INC.		Principal Place of Business 4005 CAPE HAZE DRIVE CAPE HAZE, FL 33946 US	
Mailing Address 4005 CAPE HAZE DR. CAPE HAZE, FL 33947 US			
2. Principal Place of Business 3440 Ethlyn Lane Suite, Apt. #, etc.	3. Mailing Address 3440 Ethlyn Lane Suite, Apt. #, etc.		
City & State Rotonda West FL	City & State Rotonda West FL	4. FEI Number 65-0155664	
Zip 33947	Country Charlotte	Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent LITTLESTAR, GARY DD. 4005 CAPE HAZE DR CAPE HAZE, FL 33946		7. Name and Address of New Registered Agent Name: FRANKLIN P. WAGNER II Street Address (P.O. Box Number is Not Acceptable) 3440 Ethlyn Lane City: Rotonda West FL Zip Code: 33947	
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: 5/27/05	
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	D LITTLESTAR, GARY 4005 CAPE HAZE DR. CAPE HAZE, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President FRANKLIN P. WAGNER II 3440 Ethlyn Lane Rotonda West FL 33947 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PIPER, CARL 4005 CAPE HAZE DRIVE CAPE HAZE, FL 33947 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	President PATRICIA LYNCH 3440 Ethlyn Lane SARTO Rotonda West FL 33947 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TRAVERSO, PETER 4005 CAPE HAZE DRIVE CAPE HAZE, FL <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	2nd Vice President TODD DUFRANE 3435 Ethlyn Lane Rotonda West FL 33947 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	3rd VP GARY HAMMERS 3450 Ethlyn Lane Rotonda West FL 33947 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Secy NANCY HEIGHTON 3754 Cape Haze Dr Rotonda West FL 33947 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Charles Agiles 13510 Phacida Point Phacida FL 33947 <input checked="" type="checkbox"/> Change <input type="checkbox"/> 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:  Signature and typed or printed name of signing officer or director		Date: 5/27/05 - 941-375-2611 Daytime Phone #	

CR 941 626-5719 (C)