

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 722981	
1. Entity Name CONQUISTADOR CONDOMINIUM V ASSOCIATION, INC.	

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

05 NOV 17 PM 5:08

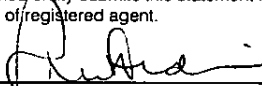
Principal Place of Business 1800 S.E. ST. LUCIE BOULEVARD CLUBHOUSE STUART, FL 34996	Mailing Address 1800 S.E. ST. LUCIE BOULEVARD CLUBHOUSE STUART, FL 34996
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country



6. Name and Address of Current Registered Agent FREDERICK, LESLEY A 1800 SE ST LUCIE BLVD STUART, FL 34996	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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.

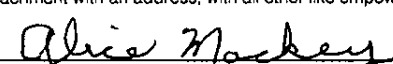
SIGNATURE  DATE 9/16/05

Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

Filing Fee is \$61.25 Due by October 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TULLNERS, SANDY 1800 SE ST LUCIE BLVD STUART, FL 34996 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Marion Pfeiffer 1800 SE ST LUCIE STUART FL 34996 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	1VP SCLAFANI, PAUL 1800 SE ST LUCIE BLVD STUART, FL 34996 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100060629871 10/14/05--01062--002 **\$61.25 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2VPD CONKLING, ANNE RAE 1800 SE ST LUCIE BLVD STUART, FL 34996 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MACKEY, ALICE 1800 SE ST LUCIE BLVD STUART, FL 34996 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	100060629871 11/17/05--01044--008 **\$175.00 ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CARLSON, MARGARET 1800 SE ST LUCIE BLVD STUART, FL 34996 ☐ 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:  DATE 9/19/05

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR