


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90346 001 ***630.00

DOCUMENT # 723533

1. Entity Name
POINCIANA VILLAGE FOUR ASSOCIATION, INC.




Principal Place of Business
401 WALNUT ST
KISSIMMEE, FL 34759 US

Mailing Address
401 WALNUT ST
KISSIMMEE, FL 34759 US

66409712

2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip Country



03182004 Chg-NP CR2E037 (10/03)

4. FEI Number
23-7352005

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

BROWN, ROCKELL Y
401 EAST WALNUT
KISSIMMEE, FL 34759-0499

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

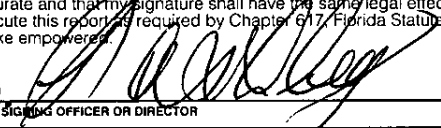
Filing Fee is \$61.25 Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. **\$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	PTD REISMAN, JOHN 401 E WALNUT KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD GETMAN, DENNIS 201 ALHAMBRA CIRCLE, 12th FLOOR CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD KNIZNER, DAVID 401 E WALNUT KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD PASHLEY, JEFFREY C. 4100 PLEASANT HILL ROAD KISSIMMEE, FL 34746	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRD MITCHELL, STEVEN J 401 WALNUT STREET KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TRD IORIO, ANTHONY S., Jr. 900 TOWNE CENTER DRIVE KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD GULLO, VINCE 401 WALNUT STREET KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD TURK, HAROLD J. 201 ALHAMBRA CIRCLE, 12th FLOOR CORAL GABLES, FL 33134	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CRIMMINS, DUSTIN 401 WALNUT STREET KISSIMMEE, FL 34759	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PREVATT, SONNIE R. 401 WALNUT STREET KISSIMMEE, FL 34759	<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		<input 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 empowerments.

SIGNATURE: PASHLEY, JEFFREY C.  **(407) 933-5308**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #