

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728274

FILED
Apr 28, 2004
Secretary of State

Entity Name: COLONIAL HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

KAREN RAGUCCI
650 HAWAII DRIVE
MERRITT ISLAND, FL 32953

New Principal Place of Business:

Current Mailing Address:

KAREN RAGUCCI
650 HAWAII DRIVE
MERRITT ISLAND, FL 32953

New Mailing Address:

FEI Number: 59-2053962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RAGUCCI, KAREN SEC
650 HAWAII DRIVE
MERRITT ISLAND, FL 32953

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: P () Delete
Name: HURT, TONY
Address: 135 ORANGE LN
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: VOLKMER, ELDON
Address: 265 MELBOURNE
City-St-Zip: MERRITT ISLAND, FL

Title: S () Delete
Name: RAGUCCI, KAREN
Address: 650 HAWAII DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: T () Delete
Name: VOLKMER, IVA
Address: 265 MELBOURNE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: BROWN, CAROLINE
Address: 210 PERTH AVE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: D () Delete
Name: WRITER, VI
Address: 100 DARWIN ST
City-St-Zip: MERRITT ISLAND, FL 32953

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: VOLKMER, ELDON
Address: 265 MELBOURNE
City-St-Zip: MERRITT ISLAND, FL 32953

Title: VP (X) Change () Addition
Name: RAGUCCI, KAREN
Address: 650 HAWAII DRIVE
City-St-Zip: MERRITT ISLAND, FL 32953

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

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

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: KAREN RAGUCCI

VP

04/28/2004

Electronic Signature of Signing Officer or Director

Date