

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 733324

FILED
Jul 23, 2005
Secretary of State

Entity Name: THE VILLAGE OF 800 PLACE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

800 NORTH FORK RD.
STUART, FL 34994

New Principal Place of Business:

Current Mailing Address:

800 NORTH FORK RD.
STUART, FL 34994

New Mailing Address:

FEI Number: 59-1658176 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SUMMERS, ROBERT
2400S. FEDERAL HWY
4TH FLOOR
STUART, FL 34994 US

Name and Address of New Registered Agent:

SIGNATURE PROPERTY MANAGEMENT
969 SOUTH FEDERAL HIGHWAY
SUITE 401
STUART, FL 34994 US

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: DIANE HARRISON

07/23/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: TD () Delete
Name: EPPELEIN, ROBERT
Address: 800 NW FORK RD #3-5
City-St-Zip: STUART, FL 34994

Title: PD () Delete
Name: DILTS, ROBERT
Address: 800 NW FORK RD #2-9
City-St-Zip: STUART, FL 34994

Title: VD () Delete
Name: WENTINK, MILDASD
Address: 800 NW FORK ROAD, #9-5
City-St-Zip: STUART, FL 34994

Title: SD () Delete
Name: BUSH, BARBARA
Address: 247 MANOR DRIVE
City-St-Zip: STUART, FL 34997

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: TD (X) Change () Addition
Name: KRAFFT, LYNN MR.
Address: 800 NW FORK RD
City-St-Zip: STUART, FL 34994

Title: PD (X) Change () Addition
Name: DILTS, ROBERT MR.
Address: 800 NW FORK RD #2-9
City-St-Zip: STUART, FL 34994

Title: VD (X) Change () Addition
Name: WENTINK, MILDRED MRS
Address: 800 NW FORK ROAD, #9-5
City-St-Zip: STUART, FL 34994

Title: SD (X) Change () Addition
Name: SCALERA, SHARON MS
Address: 800 NW FORK ROAD
City-St-Zip: STUART, FL 34997

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: BOB DILTS

PD

07/23/2005

Electronic Signature of Signing Officer or Director

Date