


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 08:00 AM
Secretary of State

DOCUMENT # 738760	
1. Entity Name ON TOP OF THE WORLD CONDOMINIUM ASSOCIATION, INC.	

Principal Place of Business 8447 S.W. 99TH STREET ROAD OCALA, FL 34481	Mailing Address 8447 S.W. 99TH STREET ROAD OCALA, FL 34481
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DO NOT WRITE IN THIS SPACE

02242005 No Chg-NP CR2E037 (10/03)

4. FEI Number 59-2778374	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 COLEN, GERALD R ESQ DEVITO & COLEN 7243 BRYAN DAIRY ROAD LARGO, FL 33777	DO NOT WRITE IN THIS SPACE
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

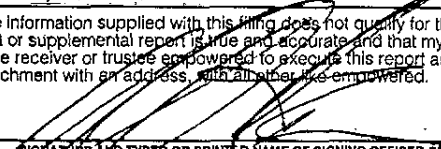
Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COLEN, SIDNEY 2291 WORLD PARKWAY BLVD. WEST CLEARWATER, FL 33763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DC COLEN, KENNETH D 8447 S.W. 99TH STREET ROAD OCALA, FL 34481
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVC COLEN, LESLEE R 2291 WORLD PARKWAY BLVD. WEST CLEARWATER, FL 33763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FARANDA, PHILIP C 8447 S.W. 99TH STREET ROAD OCALA, FL 34481
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GABLE, JOHN C 2291 WORLD PARKWAY BLVD. WEST CLEARWATER, FL 33763
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RATLIFF, VIRGIL 2291 WORLD PARKWAY BLVD. WEST CLEARWATER, FL 33763

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03/10/05-80025-001 61.25

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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:  **Kenneth D Colen** **352-873-0848**

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