2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 01, 2004
Secretary of State

DOCUMENT# 739900

Entity Name: 736 ISLAND WAY ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-1762876 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

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:	PD	( ) Delete
Name:	BOBLENZ, RICHARD	
Address:	736 ISLAND WAY #906	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	TD	( ) Delete
Name:	BEISEL, WALTER	
Address:	736 ISLAND WAY #806	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	D	( ) Delete
Name:	OMUR, ARPAT	
Address:	736 ISLAND WAY #1103	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	VD	( ) Delete
Name:	COOK, MARTIN	
Address:	736 ISLAND WAY #306	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	SD	( ) Delete
Name:	WAIRD, BETTY	
Address:	736 ISLAND WAY, #206	
City-St-Zip:	CLEARWATER, FL 33767	
Title:	D	( ) Delete
Name:	KENNEDY, DIANA	
Address:	736 ISLAND WAY, #501	
City-St-Zip:	CLEARWATER, FL 33767	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	TROYAN, GARY	
Address:	736 ISLAND WAY #501	
City-St-Zip:	CLEARWATER, FL 33767	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
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: RICHARD BOBLENZ PD 04/01/2004

Electronic Signature of Signing Officer or Director — Date