

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90035 022 ****61.25

DOCUMENT # 740863	
1. Entity Name CARIBBEAN ISLES RESIDENTIAL PARK CIVIC ASSOCIATION, INC.	

Principal Place of Business 405 ELSBERRY RD APOLLO BEACH FL 33572	Mailing Address 405 ELSBERRY RD APOLLO BEACH FL 33572
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2. Principal Place of Business Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
City & State	City & State
Zip	Country



1st MOORE CR2E037 (10/04)

4. FEI Number 59-1994122	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent YARMUTH, DAVID 131 ST. ANNE'S CIR. E. APOLLO BCH. FL 33572	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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 _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to: Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T HAMLIN, BILL 225 ST THOMAS CIR N APOLLO BEACH 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JAMES SCHORR 117 ST JOHN'S WAY E APOLLO BEACH FL 33572 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P YARMUTH, DAVID 131 ST. ANNE'S CIR. E APOLLO BEACH FL 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RALPH SEYMOUR 118 ST PIERRE'S WAY APOLLO BEACH FL 33572 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HOUGH, BETTY 126 ST. JOHNS WAY N. APOLLO BEACH FL 33572 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NANCY STAHL 121 ST PIERRE'S WAY APOLLO BEACH FL 33572 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S REED, MARY 228 ST. GEORGE CIR. APOLLO BEACH FL 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP DONALD FAUGH 227 ST THOMAS CIRCLE APOLLO BEACH FL 33572 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AT KINNAMAN, SHIRLEY 189 ST. THOMAS CIR. N. APOLLO BEACH FL 33572 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SRUASAI, BOB 196 ST. THOMAS CIR. N. APOLLO BEACH FL 33572 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ 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 empowered.

SIGNATURE: D. J. YARMUTH 1/24/05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #