

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 23, 2004 8:00 am
Secretary of State

04-23-2004 90248 045 ****61.25

DOCUMENT # 741204

1. Entity Name

EL RIO CONDOMINIUM BUILDING NO. 8, INC.



Principal Place of Business

4840 GOLF CLUB CT 2
STE 2
FORT MYERS FL 33903
US

Mailing Address

4840 GOLF CLUB COURT #8
STE. 2
NORTH FORT MYERS FL 33903
US

48000000



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2361387

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

TIPTON, VIOLA
4840 GOLF CLUB COURT STE 2
NORTH FORT MYERS FL 33903

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

ESTHER COLCORD

4840 Golf Club Ct. Apt. 12
N. Ft Myers, FL 33903

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	FORD, BILLIE <i>President</i> 4840 GOLF CLUB DIVE STE 8 NORTH FORT MYERS FL	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>VP</i> MARTIN, LOUANN <i>Betty Shute</i> 4840 GOLF CLUB DRIVE #3 FORT MYERS FL 33903	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STS FORD, BILLIE 4840 GOLF CLUB DRIVE #8 NORTH FORT MYERS FL 33903	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TIPTON, VIOLA 4840 GOLG CLUB CT #2 NORTH FORT MYERS FL 33903	☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	MB PARRICH, DORIS <i>Secretary</i> 4840 GOLF CLUB CT # 4D FORT MYERS FL 33903	☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD BENETATOS, MICHAEL <i>Board member</i> 4840 GOLF CLUB COURT #6 NORTH FORT MYERS FL 33903	☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Billie Ford President</i> 4840 Golf Club Ct # 8 N Ft Myers, FL 33903	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Betty Shute Vice President</i> 4840 Golf Club Ct # 3 N Ft Myers, FL 33903	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Esther Colcord</i> 4840 Golf Club Ct # 12 N Ft Myers, FL 33903	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<i>Secretary</i> Darin Parrich 4840 Golf Club Ct # 4 N Ft Myers, FL 33903	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
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:

Esther Colcord ESTHER COLCORD 4/20/04- 239-656-1332

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #