2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 742565

FILED Jan 06, 2004 Secretary of State

Entity Name: CASA DEL MAR CONDOMINIUM ASSOCIATION NO. 4 OF ST. PETERSBURG, INC.

Current Principal Place of Business: New Principal Place of Business: 4 OF ST. PETERSBURG, INC. CASA DEL MAR #4 OF ST. PETERSBURG, INC. 5901 SUN BLVD SUITE 203 5901 SUN BLVD SUITE 203 ST. PETERSBURG, FL 33715 US ST. PETERSBURG, FL 33715 US **Current Mailing Address:** New Mailing Address: 4 OF ST. PETERSBURG, INC. CASA DEL MAR #4 OF ST. PETERSBURG, INC. 5901 SUN BLVD SUITE 203 5901 SUN BLVD SUITE 203 ST. PETERSBURG, FL 33715 US ST. PETERSBURG, FL 33715 US FEI Number: 59-2020444 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: NEWTON, WILLIAM C. 5901 BLVD SUITE 203 ST. PETERSBURG, FL 33715 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: VPD () Delete () Change () Addition RIXON, ROBERT Name: Name: 5901 SUN BLVD 203 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33715 City-St-Zip: Title: () Delete Title: () Change () Addition FLORE, RICHARD Name: Name: Address: 5901 SUN BLVD 203 Address: City-St-Zip: SAINT PETERSBURG, FL 33715 City-St-Zip: Title: () Delete Title: () Change () Addition MULLEN, DICK Name: Name: 5901 SUN BLVD 203 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33715 City-St-Zip: Title: TRS () Delete Title: () Change () Addition Name: POOLER, VICTOR Name: Address: 5901 SUN BLVD., #203 Address: City-St-Zip: SAINT PETERSBURG, FL 33715 City-St-Zip: Title: () Delete Title: () Change () Addition RICHARDS, GALEN Name: Name: 5901 SUN BLVD 203 Address: Address: City-St-Zip: SAINT PETERSBURG, FL 33715 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: GALEN RICHARDS MR 01/06/2004