2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 09, 2004 8:00 am
Secretary of State
07-09-2004 90005 011 ****61.25

DOCUMENT # 743383

1. Entity Name
BENT TREE HOMEOWNERS ASSOCIATION, INC. OF MELBOURNE

Principal Place of Business	Mailing Address
P O BOX 372935 SATELLITE BEACH, FL 32937-0935 US	P O BOX 372935 SATELLITE BEACH, FL 32937-0935 US

07052004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1986272 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NARDELLA, EDWARD V. 1122 STEVEN PATRICK AVE. INDIAN HARBOUR BCH, FL 32937	Name Street Address (P.O. Box Number is Not Acceptable) City **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

Filing Fee is $61.25
Due by September 8, 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP MONAHAN, GARY 1134 MARY JOYE AVE INDIAN HARBOUR BEACH, FL 32937	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Robert- ROESSLER 1111 STEVEN PATRICK AVE. IH Beach fl. 32937	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD NARDELLA, EDWARD V. 1122 STEVEN PATRICK AVE. INDIAN HAR BCH, FL 00000,	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD JANTZEN, AUDREY O 1102 MARY JOYE AVE INDIAN HARBOUR BC, FL	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD ROGERS, DONALD 1115 STEVEN PATRICK AVE INDIAN HARBOUR BCH, FL 32937	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD JACKSON, DIANE 1123 STEVEN PATRICK AVE INDIAN HARBCH, FL 32937	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ 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: Edward V. Nardella. P. D. July 7th -2004
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #