2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 10, 2004
Secretary of State

DOCUMENT# 744242

Entity Name: VILLA DEL ALTO PROPERTY OWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

1005 RUSSELL DRIVE #4
HIGHLAND BEACH, FL 334874267

New Principal Place of Business:

Current Mailing Address:

1005 RUSSEL DR # 4
HIGHLAND BEACH, FL 334874267 US

New Mailing Address:

FEI Number: **FEI Number Applied For ( )** **FEI Number Not Applicable (X)** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHNSON, KATHLEEN B
125 CRAWFORD BLVD.
BOCA RATON, FL 33483 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: VD ( ) Delete
Name: PASIN, MITCHELL
Address: 1005 RUSSELL DR #2
City-St-Zip: HIGHLAND BEACH, FL

Title: VPD ( ) Delete
Name: GARDNER, ROBERT
Address: 1005 RUSSELL DRIVE #5
City-St-Zip: HIGHLAND BEACH, FL

Title: PSD ( ) Delete
Name: WOLFF, JERRY,
Address: 1005 RUSSELL DR. #4
City-St-Zip: HIGHLAND BEACH, FL

Title: VD ( ) Delete
Name: FELDMEY, ALVIN T
Address: 1005 RUSSELL DR #5
City-St-Zip: HIGHLAND BEACH, FL 33487

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: JERRY A WOLFF PSD 01/10/2004

Electronic Signature of Signing Officer or Director — Date