

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 29, 2004 8:00 am
Secretary of State

01-29-2004 90101 012 ****61.25

DOCUMENT # 744310					
1. Entity Name MORTON VILLAGE CONDOMINIUM ASSOCIATION, INC.					
Principal Place of Business 5400 34TH STREET WEST BRADENTON, FL 34210			Mailing Address 5400 34TH STREET WEST BRADENTON, FL 34210		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-1923361	
Zip		Country		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		
MUNRO, JOAN 5400 34TH STREET WEST BRADENTON, FL 34210			Name C.I.S. CONDOMINIUM MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 4301 32nd ST W. STE A-20 City BRADENTON FL Zip Code 34205		
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 <u>KRISTIN M. CALKINS</u> <u>Kristin M. Calkins</u> <u>1/2/04</u> Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating.) DATE					
Filing Fee is \$81.25 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	GLAZER, GEORGE		NAME		
STREET ADDRESS	5400 34TH ST W #3D		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP		
TITLE	SEC	☒ Delete	TITLE	☒ Change ☐ Addition	
NAME	MUNRO, JOAN		NAME	D CHIAFFREDO, ROBERT	
STREET ADDRESS	5400 34TH ST. W12F		STREET ADDRESS	5400 34TH ST. W. #17H	
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP	BRADENTON, FL 34210	
TITLE	D	☐ Delete	TITLE	☒ Change ☐ Addition	
NAME	LOGAN, RALPH		NAME	SEC LOGAN, RALPH	
STREET ADDRESS	5400 34TH ST. W. 5G		STREET ADDRESS	5400 34TH ST. W. H-5G	
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP	BRADENTON, FL 34210	
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	RYDER, ERNEST		NAME		
STREET ADDRESS	5400 34TH ST W #2L		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	MCLEOD, CHARLES		NAME		
STREET ADDRESS	5400 34TH STREET WEST D17		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP		
TITLE	TD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	REITE, JOHN		NAME		
STREET ADDRESS	5400 34TH ST W #8D		STREET ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 34210		CITY-ST-ZIP		
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: <u>[Signature]</u> <u>1/15/04</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone					

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