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

SIGNATURE: _

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Apr 07, 2004 8:00 am Secretary of State **DOCUMENT # 745321** 1. Entity Name 04-07-2004 90022 007 ****61.25 VANDERBILT SURF COLONY RECREATIONAL AND MAINTENANCE ASSOCIATION, INC. Principal Place of Business Mailing Address 11 BLUEBILL AVE 11 BLUEBILL AVE SUITE 1005 NAPLES FL 34108 SUITE 1005 NAPLES FL 34108 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 502 CR2E037 (11/03) 502 5017E SUITE City & State City & State Applied For 4. FEI Number 59-1798261 Not Applicable Zip Zin Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent HERMAN STUBLE, ALBERT H Street Address (P.O. Box Number is Not Acceptable) 11 BLUÉBILL AVENUE **SUITE 1005** SUITE 502 NAPLES FL 34108 City Zip Code 34108 NAPLES 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 e if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DVS Delete TITLE ☐ Change Addition KNAK, WILBUR NAME NAME 17 BLUEBILL AVE STREET ADDRESS STREET ADDRESS NAPLES FL 34108 CITY-ST-ZIP CITY-ST-ZIP PD TITLE ☐ Delete TITLE ☐ Change Addition RICHARD, RICHIE NAME NAME 15 BLUEBILL AVENUE STREET ADDRESS STREET ADDRESS NAPLES FL 34108 City_St_7IP CITY-ST-ZIP TD TITLE Delete ☐ Change Addition STUBLE: ALBERT H NAME NAME 11 BLUEBILL AVE STREET ADDRESS STREET ADDRESS NAPLES FL 34108 CITY-ST-ZIP CITY-ST-ZIP TITLE カレら ☐ Delete カッS TITLE Change ☐ Addition NAME HAL LINERRUD NAME HAROLD LINGREUD STREET ADDRESS 17 BLUEBILL AVE STREET ADDRESS 17 BLUEBILL AVE CITY-ST-ZIP CITY-ST-ZIP NAPLES, FL TITLE ナカ ☐ Delete TITLE ☐ Change Addition HERMAN GROH NAME HERMAN GRUH NAME 11 BLUEBALL AVE STREET ADDRESS STREET ADDRESS BLUEBILL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 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.

FILED

3/16/04

Daytime Phone #