

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 31, 2005 8:00 am
Secretary of State

03-31-2005 90041 018 ****70.00

DOCUMENT # 748735	
1. Entity Name THE REEF CONDOMINIUM ASSOCIATION OF MELBOURNE, INC.	

Principal Place of Business 1095 NORTH A1A HWY #808 INDIALANTIC, FL 32903	Mailing Address 1095 NORTH A1A HWY #808 INDIALANTIC, FL 32903
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01072005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1976317	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MATTHEWS, GEORGE 1095 N. HWY. A-1A #301 INDIALANTIC, FL 32903	
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**DO NOT WRITE
IN THIS SPACE**

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 Margaret Anne Walterhouse
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 May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐ **\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WILEN, ELLEN <u>WALTERHOUSE, MARGARET ANNE</u> 1095 N A1A #306 <u>1095 N. HWY. A1A #503</u> INDIALANTIC, FL 32903 <u>INDIALANTIC FL 32903</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STEIDL, BOB 1095 N A1A #607 INDIALANTIC, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD WILDMAN-KLINE, JANE 1095 N A1A 604 INDIALANTIC, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALTERHOUSE, MARGARET A <u>MATTHEWS, GEORGE</u> 1095 N A1A #503 <u>1095 N. HWY A1A #301</u> INDIALANTIC, FL 32903 <u>INDIALANTIC FL 32903</u>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FEAD, LOU 1095 N A1A #705 INDIALANTIC, FL 32903
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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IN THIS SPACE**

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: Margaret Anne Walterhouse 3/28/05 321-725-5616
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #