

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 748776

FILED
Feb 16, 2004
Secretary of State**Entity Name:** COUNTRY CLUB VISTA PROPERTY OWNERS' ASSOCIATION, INC.**Current Principal Place of Business:**1600 LENOX COURT NE
PALM BAY, FL 32905**New Principal Place of Business:****Current Mailing Address:**1600 LENOX COURT NE
PALM BAY, FL 32905**New Mailing Address:****FEI Number:** 59-2348602**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**JARVI, BRADLEY R
1608 SUNNY BROOK LANE NE
E107
PALM BAY, FL 32905 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:** PD () Delete
Name: CHAPDELAINE, NORMAN
Address: 1505 DAWES RD. NE
City-St-Zip: PALM BAY, FL 32905**Title:** VPD () Delete
Name: GAST, EVELYN
Address: 1646 DAWES RD. NE
City-St-Zip: PALM BAY, FL 32905**Title:** SD () Delete
Name: MILLER, LEONARD
Address: 1619 AVERY RD. NE
City-St-Zip: PALM BAY, FL 32905**Title:** TD () Delete
Name: LUEBKER, JUERGEN
Address: 1580 WALDORF CIR. NE
City-St-Zip: PALM BAY, FL 32905**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** VPD (X) Change () Addition
Name: VOLZ, DAVID
Address: 1603 AVERY ROAD NE
City-St-Zip: PALM BAY, FL 32905**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: NORMAN CHAPDELAINE

PD

02/16/2004

Electronic Signature of Signing Officer or Director

Date