

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 26, 2005 08:00 AM
Secretary of State

DOCUMENT # 750090	
1. Entity Name CENTRAL INDUSTRIAL PARK, NORTH ASSOCIATION, INC.	

Principal Place of Business	Mailing Address
3570 CONSUMER ST UNIT 7 RIVIERA BEACH, FL 33404-1740	3570 CONSUMER ST UNIT 7 RIVIERA BEACH, FL 33404-1740



01212005 No Chg-NP CR2E037 (10:03)

DO NOT WRITE IN THIS SPACE

4. FEE Number 59-2171071	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required
------------------------------------	---

6. Name and Address of Current Registered Agent JOHANSEN, L.E. 3570 CONSUMER ST. RIVIERA BCH., FL 33404

**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, to be stated with effect from the obligations of registered agent.

SIGNATURE _____

**Filing Fee is \$61.25
Due by May 1, 2005**

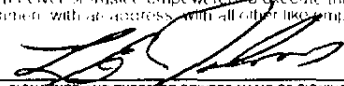
9. Election Campaign Financing
Fund Contribution ☐ **\$5.00** May Be
Added to Fees

10. OFFICERS AND DIRECTORS	
Officer NAME Street Address City/State/Zip	PD JOHANSEN, L E 3570 CONSUMER ST RIVIERA BCH., FL 334704
Officer NAME Street Address City/State/Zip	VD MENG, PHILIP G 8395 GARDEN ST RIVIERA BCH., FL 33404
Officer NAME Street Address City/State/Zip	D WOOD, MICHAEL 3592 PROSPECT AVENUE WEST PALM BEACH, FL 33404
Officer NAME Street Address City/State/Zip	
Officer NAME Street Address City/State/Zip	
Officer NAME Street Address City/State/Zip	

000000197361
01/27/05-800009-006 61.25

**DO NOT WRITE
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)(b) Florida Statutes, further, I 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. The information is provided by the corporation or the officer 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, changed or on an attachment, with an address, with all other like empowered.

SIGNATURE:  **L E JOHANSEN**
SIGNATURE AND TYPE OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR