

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

FILED
Aug 02, 2004 8:00 am
Secretary of State

08-02-2004 90016 010 ****61.25

DOCUMENT # 755149

1. Entity Name

MUIRFIELD VILLAS ASSOCIATION, INC.



Principal Place of Business
704 MUIRFIELD CIRCLE
ATLANTIS FL 33462
US

Mailing Address 704
704 MUIRFIELD CIR
ATLANTIS FL 33462
US

44031331



MOORE CR2E037 (4/04)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2167740

Applied For

Not Applicable

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

~~KRUPN, THOMAS J~~
704 MUIRFIELD CIRCLE
ATLANTIS FL 33462

Suzanne J. Hickman

Name Suzanne J. Hickman
Street Address (P.O. Box Number is Not Acceptable)
704 Muirfield Circle
City Atlantis FL Zip Code 33462

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

Suzanne J. Hickman

Suzanne J. Hickman Treasurer

7/27/04

FILE NOW: FEE IS \$61.25
Due By September 8, 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

TITLE	PD	<input type="checkbox"/> Delete
NAME	DOUGLAS, RONALD X	
STREET ADDRESS	MUIRFIELD CIRCLE	
CITY-ST-ZIP	LAKE WORTH FL 33462	
TITLE	TD	<input type="checkbox"/> Delete
NAME	HICKMAN, SUZANNE J	
STREET ADDRESS	704 MUIRFIELD CIRCLE	
CITY-ST-ZIP	ATLANTIS FL 33462	
TITLE	SD	<input type="checkbox"/> Delete
NAME	JOHNSTON, FRANCES M	
STREET ADDRESS	706 MUIRFIELD CIRCLE	
CITY-ST-ZIP	LAKE WORTH FL 33462	
TITLE	D	<input type="checkbox"/> Delete
NAME	GIULIANO, PETER	
STREET ADDRESS	756 MUIRFIELD CIRCLE	
CITY-ST-ZIP	ATLANTIS FL 33462	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALLEN, ROBERT	
STREET ADDRESS	756 MUIRFIELD CIRCLE	
CITY-ST-ZIP	ATLANTIS FL 33462	
TITLE	D	<input type="checkbox"/> Delete
NAME	KRUPA, TOM	
STREET ADDRESS	776 MUIRFIELD CIRCLE	
CITY-ST-ZIP	ATLANTIS FL 33462	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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STREET ADDRESS	
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NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
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:

Suzanne J. Hickman
Suzanne J. Hickman Treasurer

7/27/04

564-642-7060

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #