## 2004 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

**DOCUMENT #757992** 

## **FILED** Mar 15, 2004 8:00 am Secretary of State 03-15-2004 90001 042 \*\*\*\*61.25

	UX VILLAGE ASSOCIATION	N, NO. 3, INC	NATURE SECTION AND ADDRESS OF THE PARTY OF T			
Principal Place 13602 FRIGA #N-103 CLEARWATER	TE CT .	Mailing Address 13602 FRIGATE CT #N-103 CLEARWATER, FL 33762	. US		54017809	
2. Principal Pl	lace of Business	3. Mailing Address				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		01292004 Ch	g-NP CR2E037 (10/03)	
City & State	9	City & State		4. FEI Number 59-211816	1 Applied For Not Applica	
Zip	Country	Zip.	Country	5. Certificate of Sta	SR 75 Additional	
	6. Name and Address of Current	Registered Agent		≃ ≅=7.≑Name and Add	ress of New Registered Agent	
ÁNKWITZ,	WALTER J				ASSOCIATES	
13602 FRI #N-102	GATE CT		Street Addi	ress (P.O. Box Number is N	Not Acceptable . # 160	
CLEARWA	TER, FL 33762					
			(CL	CLEARWATER FL 33762		
	Sporture, typed or partied name of registered agent.	well so		0ENT	the State of Florida. I am familiar with, and acc  3-4-04  DATE	epi
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	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Camp Trust Fund Co		\$5.00 May Be Added to Fees	Make check payable to Florida Department of State	
10.	_	Trust Fund Co		Added to Fees		
10.	Due by May 1, 2004	Trust Fund Co	ontribution.	Added to Fees	Florida Department of State ES TO OFFICERS AND DIRECTORS IN 10	dition
	Due by May 1, 2004 OFFICERS AND DIF	Trust Fund Co	ontribution.	Added to Fees	Florida Department of State ES TO OFFICERS AND DIRECTORS IN 10	dition
TITLE	OFFICERS AND DIF	Trust Fund Co	11. TITLE	Added to Fees	Florida Department of State ES TO OFFICERS AND DIRECTORS IN 10	noitib
TITLE NAME	Due by May 1, 2004  OFFICERS AND DIF PD SNEDECKER, CLINTON	Trust Fund Co	ntribution.   11.  TITLE  NAME	Added to Fees	Florida Department of State ES TO OFFICERS AND DIRECTORS IN 10	dition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Due by May 1, 2004  OFFICERS AND DIF PD SNEDECKER, CLINTON 2480 PELICAN COURT UNIT R1	Trust Fund Co	11. TITLE NAME STREET ADDRESS CITY-ST-ZIP	Added to Fees ADDITIONS/CHANGE	Florida Department of State ES TO OFFICERS AND DIRECTORS IN 10  Change Add	
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12. Thereby 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.

CITY-ST-ZIP