2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759655

FILED Feb 28, 2005 Secretary of State

Entity Name: SOUTH RIVER VILLAGE ONE CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

30 SW SOUTH RIVER DRIVE STUART, FL 34997

Current Mailing Address: New Mailing Address:

30 SW SOUTH RIVER DRIVE STUART, FL 34997

FEI Number: 59-2142504 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

CORNETT, JANE P.A. 401 E. OSCEOLA STREET STUART, FL 34994 US

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:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition

Title: P () Delete Title:

Name: SMITH, BONNA Name: MCCOY, JOHN
Address: 181 SW SOUTH RIVER DR., #201 Address: 61 SW SOUTH RIVER DR., #207

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: SD () Delete Title: VPD (X) Change () Addition Name: THUNHORST, PATRICIA Name: OZOLS, GUNNARS M

Address: 181 SW SOUTH RIVER DR., #101 Address: 61 SW SOUTH RIVER DR., #201

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: TD () Delete Title: SD (X) Change () Addition Name: WELCH, PAULINE Name: MARLIN, ANDREW A

Address: 121 SW SOUTH RIVER DR., #105 Address: 91 SW SOUTH RIVER DR., #104

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

Title: VD () Delete Title: TD (X) Change () Addition Name: VALPATIC, MARLENE Name: ROBINSON, RONALD J

Address: 181 SW SOUTH RIVER DR #207 Address: 121 SW SOUTH RIVER DR #202

City-St-Zip: STUART, FL 34997 City-St-Zip: STUART, FL 34997

 Name:
 WARNER, GERALD
 Name:

 Address:
 31 SW SOUTH RIVER DR #206
 Address:

 City-St-Zip:
 STUART, FL 34997
 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: JOHN MCCOY PD 02/28/2005