

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759861

FILED
Apr 14, 2004
Secretary of State

Entity Name: AUGUSTA WOODS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

R&P PROPERTY MGMT
265 AIRPORT ROAD S.
NAPLES, FL 34104 US

New Principal Place of Business:

Current Mailing Address:

C/O R&P PROPERTY MGMT
265 S. AIRPORT ROAD
NAPLES, FL 34104

New Mailing Address:

FEI Number: 59-2168240 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 33942 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: VD () Delete
Name: IOVINO, RALPH
Address: 5809 RATTLESNAKE HAMMOCK RD #104
City-St-Zip: NAPLES, FL 34113

Title: TD () Delete
Name: ZALUSKY, THOMAS
Address: 5825 RATTLESNAKE HAMMOCK RD #203
City-St-Zip: NAPLES, FL 34104

Title: SD () Delete
Name: ROSSI, THERESA
Address: 5825 RATTLESNAKE HAMMOCK RD 104
City-St-Zip: NAPLES, FL 34113

Title: D () Delete
Name: GRIMES, MARY
Address: 5857 RATTLESNAKE HAMMOCK RD #201
City-St-Zip: NAPLES, FL 34113

Title: PD () Delete
Name: MAHIEU, ROGER
Address: 5809 RATTLESNAKE ROAD
City-St-Zip: NAPLES, FL 34113

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ROGER MAHIEU

PD

04/14/2004

Electronic Signature of Signing Officer or Director

Date