

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 01, 2005 8:00 am**  
**Secretary of State**

04-01-2005 90013 020 \*\*\*\*61.25

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<b>DOCUMENT # 763856</b> 1. Entity Name <b>THE DUNE OF HUTCHINSON ISLAND CONDOMINIUM ASSOCIATION, INC.</b>			
Principal Place of Business <b>4751 NE OCEAN BLVD JENSEN BCH, FL 34957 US</b>		Mailing Address <b>P O BOX 65 JENSEN BCH, FL 34958 US</b>	
2. Principal Place of Business Suite, Apt. #, etc. City & State Zip		3. Mailing Address <i>1111 SE Federal Hwy Suite 100 Stuart, FL 34994</i> Suite, Apt. #, etc. City & State Zip	
4. FEI Number <b>59-2304286</b>		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>	
6. Name and Address of Current Registered Agent <b>FORTE, LORRAINE 1274 N.E. BUSINESS PARK PL JENSEN BEACH, FL 34957</b>		7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) <i>1111 SE Federal Hwy Suite 100</i> City <i>Stuart</i> <b>FL</b> Zip Code <i>34994</i>	
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 <i>Lorraine A. Forte</i> (NOTE: Registered Agent signature required when reinstating) DATE <i>1/20/05</i>			
<b>Filing Fee is \$61.25 Due by May 1, 2005</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
<b>10. OFFICERS AND DIRECTORS</b>		<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEXTER, RITA 4651 NE OCEAN BLVD #21 JENSEN BEACH, FL 34957	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD INSABELLA, MICHAEL 4751 NE OCEAN DR #2 JENSEN BEACH, FL 34957
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FORHAN, ROBERT 4751 NE OCEAN BLVD #1 JENSEN BEACH, FL 34957	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S-DT BARTSCHAT, KLAUS 4751 NE OCEAN BLVD. #9 JENSEN BEACH, FL	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HALL, VINCENT C JR 4751 NE OCEAN DR #11 JENSEN BEACH, FL 34957	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD HARRIS, MARY 4751 NE OCEAN BLVD JENSEN BCH, FL 34957	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PCHRISTENSON, THOMAS 4651 NE OCEAN DR #16 JENSEN BEACH, FL 34957
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change Addition
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: <i>Vincent C Hall Jr</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		3/27/05 772 225 1916 Date Daytime Phone #	