


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

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90017 033 ****61.25

DOCUMENT # 763917 1. Entity Name OCEAN TRAIL CONDOMINIUM ASSOCIATION NO. V, INC.																																																																																																																																																											
Principal Place of Business 500 OCEAN TRAIL WAY JUPITER FL 33477			Mailing Address 500 OCEAN TRAIL WAY JUPITER FL 33477																																																																																																																																																								
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 1930 Commerce G K Suite, Apt. #, etc.																																																																																																																																																									
City & State Jupiter FL		City & State Jupiter FL		4. FEI Number 59-2221533																																																																																																																																																							
Zip 33458		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																																																																																							
6. Name and Address of Current Registered Agent MATTEUCCI, VINCENT 500 OCEAN TRAIL WAY, #604 JUPITER FL 33477				7. Name and Address of New Registered Agent Name Steve English PCAR Street Address (P.O. Box Number is Not Acceptable) 50 Bristol Management 1930 Commerce G K City Jupiter FL Zip Code 33458																																																																																																																																																							
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____																																																																																																																																																											
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees																																																																																																																																																							
Make Check Payable to Florida Department of State																																																																																																																																																											
<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th colspan="3" style="padding: 5px;">10. OFFICERS AND DIRECTORS</th> <th colspan="3" style="padding: 5px;">11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</th> </tr> <tr> <td style="width: 15%; padding: 5px;">TITLE</td> <td style="width: 55%; padding: 5px;">SD LAROUX, JERRY <input checked="" type="checkbox"/> Delete</td> <td style="width: 10%; padding: 5px;"></td> <td style="width: 15%; padding: 5px;">TITLE</td> <td colspan="2" style="padding: 5px;">RICHARD BRIONES D <input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td style="padding: 5px;">NAME</td> <td style="padding: 5px;">500 OCEAN TRAIL WAY #506</td> <td></td> <td style="padding: 5px;">NAME</td> <td colspan="2" style="padding: 5px;">500 OCEAN TRAIL WAY #607</td> </tr> <tr> <td style="padding: 5px;">STREET ADDRESS</td> <td style="padding: 5px;">JUPITER FL 33477</td> <td></td> <td style="padding: 5px;">STREET ADDRESS</td> <td colspan="2" style="padding: 5px;">JUPITER FLORIDA 33477</td> </tr> <tr> <td style="padding: 5px;">CITY - ST - ZIP</td> <td style="padding: 5px;"></td> <td></td> <td style="padding: 5px;">CITY - 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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 any other like empowered.																																																																																																																																																											
SIGNATURE: <i>Donald D. Shorr</i> DONALD D. SHORR Feb 20, 2004 561-575-3551																																																																																																																																																											
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #																																																																																																																																																											