

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Mar 02, 2005
Secretary of State**

DOCUMENT# 764046

Entity Name: CAPE HACIENDA CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

6655 RIDGEWOOD AVENUE #105
COCOA BEACH, FL 329311084

New Principal Place of Business:

Current Mailing Address:

6655 RIDGEWOOD AVENUE #105
COCOA BEACH, FL 329311084

New Mailing Address:

FEI Number: 59-2359032 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WARNER, BILL
6655 RIDGEWOOD AVE #105
COCOA BEACH, FL 32931 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: P () Delete
Name: HINES, ELEANOR
Address: 6655 RIDGEWOOD AVE # 205
City-St-Zip: COCOA BEACH, FL 32931

Title: V () Delete
Name: SHAFFER, WILLARD
Address: 6655 RIDGEWOOD AVE # 103
City-St-Zip: COCOA BEACH, FL 32931

Title: T () Delete
Name: WARNER, BILL
Address: 6655 RIDGEWOOD #105
City-St-Zip: COCOA BEACH, FL 32931

Title: S () Delete
Name: BOPL, BETTY
Address: 6655 RIDGEWOOD AVE # 203
City-St-Zip: COCOA BEACH, FL 32931

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: HINES, ELEANOR
Address: 6655 RIDGEWOOD AVE # 205
City-St-Zip: COCOA BEACH, FL 32931

Title: V (X) Change () Addition
Name: WEEKLY, IRENE
Address: 6655 RIDGEWOOD AVE # 101
City-St-Zip: COCOA BEACH, FL 32931

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

Title: S (X) Change () Addition
Name: SELI, FRED
Address: 6655 RIDGEWOOD AVE # 203
City-St-Zip: COCOA BEACH, FL 32931

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: BILL WARNER

Electronic Signature of Signing Officer or Director

TREA

03/02/2005

Date