

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

FILED
Feb 17, 2004 8:00 am
Secretary of State

02-17-2004 90029 014 ****61.25

DOCUMENT # 767491

1. Entity Name

CORLEY ISLAND HOMEOWNERS ASSOC., INC.



Principal Place of Business

138 KINGS BLVD
LEESBURG FL 34748
US

Mailing Address

138 KINGS BLVD
LEESBURG FL 34748
US

2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2871839

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SMITH, JAMES C
189 DUTCHESS DR
LEESBURG FL 34748

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(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. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME GOSS, ELMER
STREET ADDRESS 19 KINGS BLVD
CITY-ST-ZIP LEESBURG FL 34748

TITLE VATD ☐ Delete
NAME SAITZ, MARIE
STREET ADDRESS 157 KINGS BLVD
CITY-ST-ZIP LEESBURG FL 34748

TITLE D ☐ Delete
NAME FERBER, EDWARD
STREET ADDRESS 99 QUEENS DR
CITY-ST-ZIP LEESBURG FL 34748

TITLE D ☐ Delete
NAME ORCHARD, PEGGY
STREET ADDRESS 30 KINGS BLVD
CITY-ST-ZIP LEESBURG FL 34748

TITLE TD ☐ Delete
NAME SMITH, JAMES
STREET ADDRESS 189 DUTCHESS DR
CITY-ST-ZIP LEESBURG FL 34748

TITLE D ☐ Delete
NAME BRADLEY, LEO
STREET ADDRESS 241 PRINCE DR
CITY-ST-ZIP LEESBURG FL 34748

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE VD ☐ Change ☒ Addition
NAME SWEHLA, LORNA
STREET ADDRESS 157 KINGS BLVD
CITY-ST-ZIP LEESBURG FL 34748

TITLE D ☐ Change ☒ Addition
NAME KROON, BIRGIT
STREET ADDRESS 217 PRINCE DR.
CITY-ST-ZIP LEESBURG FL 34748

TITLE D ☐ Change ☒ Addition
NAME ROBINSON, NATHANIEL
STREET ADDRESS 175 CROWN DR
CITY-ST-ZIP LEESBURG FL 34748

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

James C. Smith JAMES C. SMITH

Date

2-11-04

Daytime Phone #

352-323-8753