2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 09, 2004
Secretary of State

DOCUMENT# 768009

Entity Name: COSTA VISTA HOMEOWNERS' ASSN., INC.

Current Principal Place of Business:

2362 OLD HWY 98
DESTIN, FL 32550 US

New Principal Place of Business:

Current Mailing Address:

2362 OLD HWY 98
DESTIN, FL 32550 US

New Mailing Address:

FEI Number: 57-0893268 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, TED
2362 OLD HWY 98
DESTIN, FL 32550

Name and Address of New Registered Agent:

LOWERY, RODNEY
2362 OLD HWY 98
DESTIN, FL 32550

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: RODNEY LOWERY 01/09/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CARLSON, RONI
Address: 742 BELMONT RIDGE DR
City-St-Zip: LAWRENCEVILLE, GA 30043

Title: TD ( ) Delete
Name: HULSOY, TERRY
Address: 574 SHOS CREST RD.
City-St-Zip: HOOVER, AL 35226

Title: VD ( ) Delete
Name: BEHNKE, ELMER
Address: 407 GOLF DRIVE
City-St-Zip: BIRMINGHAM, AL 35226

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change ( ) Addition
Name: PAYNE, TED
Address: 269 OLYMPIC DR.
City-St-Zip: WETMPKA, AL 36093

Title: TD (X) Change ( ) Addition
Name: HOMOLKA, CHARLENE
Address: 855 HWY. 64W
City-St-Zip: CASHIERS, NC 28717

Title: VD (X) Change ( ) Addition
Name: SMITH, SUZETTE
Address: 705 GULF SHORE DR.
City-St-Zip: DESTIN, FL 32541

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: TED PAYNE PD 01/09/2004
Electronic Signature of Signing Officer or Director Date