


# 2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Apr 07, 2005 8:00 am**  
**Secretary of State**

04-07-2005 90022 018 \*\*\*150.00

<b>DOCUMENT # H58326</b> 1. Entity Name <b>MARY LU HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>24437 HARBORVIEW RD, BOX 222 CHARLOTTE HARBOR FL 33980</b>			Mailing Address <b>24437 HARBORVIEW RD, BOX 222 CHARLOTTE HARBOR FL 33980</b>		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number <b>59-2593151</b>	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b> Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>RIST, LYDIA 24437 HARBOR VIEW RD. LOT #79 CHARLOTTE HARBOR FL 33980</b>				Name Street Address (P.O. Box Number is Not Acceptable) City <b>FL</b> 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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
<b>FILE NOW!!! FEE IS \$150.00</b> <b>After May 1, 2005 Fee Will Be \$550.00</b> <b>Make Check Payable to Florida Department of State</b>				9. Election Campaign Financing <b>\$5.00 May Be</b> Trust Fund Contribution. <input type="checkbox"/> <b>Added to Fees</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>P</b> <b>ARMBRICHT, ARNOLD</b> <b>24437 HARBORVIEW RD #45</b> <b>PORT CHARLOTTE FL 33980</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP EDWARD WALLACE</b> <b>24437 HARBORVIEW RD #87</b> <b>CHARLOTTE HARBOR, FL 33980</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>VP</b> <b>BURNS, MAJORIE</b> <b>24437 HARBORVIEW RD # 59</b> <b>CHARLOTTE HARBOR FL 33980</b> <input checked="" type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>S</b> <b>RUSSELL, SANDRA</b> <b>24437 HARBORVIEW RD # 18</b> <b>CHARLOTTE HARBOR FL 33980</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>T</b> <b>RIST, LYDIA</b> <b>24437 HARBORVIEW RD LOT #79</b> <b>CHARLOTTE HARBOR FL 33980</b> <input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 607, 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.					
<b>SIGNATURE: <i>Lydia Rist</i> Lydia Rist Treasurer 03-31-05 (941) 634-2037</b> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

**ATTACHMENT**

**40049183**

**Mar. 31, 2005**

**2005 UNIFORM BUSINESS REPORT  
MARY LU HOMEOWNERS ASSOCIATION, INC.  
DOCUMENT #H58326**

**ANNUAL MEETING OF BOARD OF DIRECTORS  
AS OF MARCH 08, 2005**

**DELETE BOARD DIRECTORS:**

**Marvin Williams  
Louise Gentile  
Toivo Suomela**

**ADD NEW DIRECTORS:**

**Harry Russell  
24437 Harborview Road #18  
Charlotte Harbor, FL 33980**

**Stan Willey  
24437 Harborview Road #90  
Charlotte Harbor, FL 33980**

**Max Cheyney  
24437 Harborview Road #96  
Charlotte Harbor, FL 33980**

**Thank you.**