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

CITY-ST-ZIP

Feb 04, 2004 08:00 AM DOCUMENT # N00000002420 **Secretary of State** 1. Entity Name THE PRESERVE AT JENSEN BEACH COUNTRY CLUB ASSOCIATION, INC. Principal Place of Business Mailing Address C/O STEPHEN NOVAK 3744 NW PINOAK DRIVE JENSEN BEACH FL 34957 C/O STEPHEN NOVAK 3744 NW PINOAK DRIVE JENSEN BEACH FL 34957 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-3651964 Not Applicable Zio Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name NOVAK, STEPHEN Street Address (P.O. Box Number is Not Acceptable) 3744 NW PIN OAK DRIVE JENSEN BEACH FL 34957 City 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 regulated when reinstating) 9. Election Campaign Financing FILE NOW: FEE IS \$61.25 Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete RITLE ☐ Change Addition NOVAK, STEPHEN NAME NAME U00000034628 3744 PIN OAK DRIVE STREET ADDRESS STREET ADDRESS 02/05/04-80090-016 61.25 JENSEN BEACH FL 34957 City-St-7iP CITY-ST-ZIP 333 LE ☐ Delete BILE ☐ Change ☐ Addition HERSHBERGER, DAVID NAME MAME 3736 DEER OAK DR. STREET ADDRESS STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-ZIP CITY-ST-ZIP Change Addition BILE ☐ Delete MADER, DON MAME NAME 3504 PIN OAK DRIVE STREET ADDRESS STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-ZIP CITY-ST-ZIP TITLE Defete BBE Change Addition MAZZINI, ANN NALE NAME 3784 PIN OAK DRIVE STREET ADDRESS STREET ADDRESS JENSEN BEACH FL 34957 CITY-ST-218 CITY-SI-ZIP TITLE ☐ Detete TITLE Change Addition NAME MAME STREET ADDRESS STREET ADDRESS CITY - ST-ZIP CRTY-ST-ZIP TITLE Delete TITLE Change Addition NAME NAME STREET ADDRESS STREET ADORESS

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.

FILED

772-692-8654