

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

**FILED**  
**Apr 21, 2004 8:00 am**  
**Secretary of State**

04-21-2004 90099 032 \*\*\*\*61.25



**DOCUMENT # N00000003965**

1. Entity Name

**ABBEY ROW AT CROWN COLONY HOMEOWNERS  
ASSOCIATION, INC.**

Principal Place of Business      Mailing Address  
5801 PELICAN BAY BLVD SUITE 600      5801 PELICAN BAY BLVD SUITE 600  
NAPLES FL 34108      NAPLES FL 34108

2. Principal Place of Business      3. Mailing Address

Suite, Apt. #, etc.      Suite, Apt. #, etc.

City & State      City & State

Zip      Country      Zip      Country



MOORE      CR2E037 (11/03)

4. FEI Number      Applied For  
**59-3723658**      Not Applicable

5. Certificate of Status Desired      \$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RUEMLER, TIMOTHY J**  
**5801 PELICAN BAY BLVD SUITE 600**  
**NAPLES, FL 34108**

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      (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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	Change	Addition
D	CLASS, MARIA	5801 PELICAN BAY BLVD SUITE 600	NAPLES FL 34108	<input checked="" type="checkbox"/>	<input type="checkbox"/>
DP	MOSHER, TED	5801 PELICAN BAY BLVD 600	NAPLES FL 34108	<input type="checkbox"/>	<input type="checkbox"/>
D	GOODNIGHT, JOHN	5501 PELICAN BAY BLVD 600	NAPLES FL 34108	<input type="checkbox"/>	<input type="checkbox"/>
D	JOHN WAY	16182 CROWN ARBOR WAY	FT MYERS	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	EARLENE KINGSTON	14178 CROWN ARBOR WAY	FT MYERS, FL 33908	<input type="checkbox"/>	<input checked="" type="checkbox"/>
				<input type="checkbox"/>	<input type="checkbox"/>

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:** *[Signature]*      Date: **4/6/04**      Daytime Phone #: **239-598-4445**