## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N00000004444

FILED Feb 06, 2004 Secretary of State

Entity Name: FIELDSTREAM WEST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

882 JACKSON AVE. WINTER PARK, FL 32789

Current Mailing Address: New Mailing Address:

882 JACKSON AVE. 882 JACKSON AVE.

STE B WINTER PARK, FL 32789 WINTER PARK, FL 32789

FEI Number: 59-3668972 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of Current Registered Agent: Name and Address of New Registered Agent:

DAVIS, MARC P
882 JACKSON AVE.
STE B
WINTER PARK, FL 32789

DAVIS, MARC P
882 JACKSON AVE.
WINTER PARK, FL 32789

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: MARC P. DAVIS 02/06/2004

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD ( ) Delete Title: PD (X) Change ( ) Addition Name: JOHNSON, SAMUEL ED Name: MACHUCA, JULIO

 Name:
 Johnson, Savide EB
 Name:
 Macroca, Johnson, Solid

 Address:
 436 CASTING CT.
 Address:
 10908 LEADER LANE

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:
 ORLANDO, FL 32825

Title: VD () Delete Title: VD (X) Change () Addition Name: RODRIGUEZ, MARJOTIE Name: RODRIGUEZ, MARJORIE Address: 10753 LEADER LANE 10753 LEADER LANE

City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32825

Title: TD ( ) Delete Title: TD (X) Change ( ) Addition Name: WARD, ROBERT Name: OLSON, CHANDRA

Address: 11357 MOONSHINE CREEK CIR. Address: 304 FIELDSTREAM W. BLVD City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32825

Title: SD ( ) Delete Title: SD (X) Change ( ) Addition Name: KEEKLEY, JOHN Name: KECKLEY, JOHN

Address: 11212 MOONSHINECREEK CIR. Address: 11212 MOONSHINECREEK CIR. City-St-Zip: ORLANDO, FL 32825 City-St-Zip: ORLANDO, FL 32825

Title: D (X) Delete Title: ( ) Change ( ) Addition

 Name:
 GEIGER, JASON
 Name:

 Address:
 443 CASTING CT.
 Address:

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:

Title: D () Delete Title: () Change () Addition

 Name:
 ZAYAS, NOEL
 Name:

 Address:
 413 CASTING CT.
 Address:

 City-St-Zip:
 ORLANDO, FL 32825
 City-St-Zip:

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: JULIO MACHUCA PD 02/06/2004