2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2004
Secretary of State

DOCUMENT# N00000007299

Entity Name: CASTILLO I AT TIBURON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

24301 WALDEN CENTER DRIVE
SUITE 300
BONITA SPRINGS, FL 34134 US

New Principal Place of Business:

TIBURON BLVD E
NAPLES, FL 34109 US

Current Mailing Address:

24301 WALDEN CENTER DRIVE
SUITE 300
BONITA SPRINGS, FL 34134 US

New Mailing Address:

PO BOX 10519
NAPLES, FL 34101 US

FEI Number: 59-3687119 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HASTINGS, VIVIEN N
24301 WALDEN CENTER DRIVE
BONITA SPRINGS, FL 34134 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: WYVILL, WAYNE
Address: 12540 PLANTATION COURT
City-St-Zip: DUNKIRK, MD 20754

Title: V ( ) Delete
Name: KUTNER, MARK
Address: 35 SPRING HILL RD
City-St-Zip: FAIRFIELD, CT 06430

Title: ST ( ) Delete
Name: FRIEDMAN, MEL
Address: 8108 ANITTA ROAD
City-St-Zip: BALTIMORE, MD 21208

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
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: WAYNE WYVILL PD 04/30/2004

Electronic Signature of Signing Officer or Director — Date