

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000008223

FILED
Apr 26, 2004
Secretary of State**Entity Name:** LAKE BARRINGTON 4A CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104**New Principal Place of Business:****Current Mailing Address:**C/O R&P PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104**New Mailing Address:****FEI Number:** 59-3688133 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()****Name and Address of Current Registered Agent:**R&R PROPERTY MANAGEMENT
265 AIRPORT ROAD SOUTH
NAPLES, FL 34104 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:** PD () Delete
Name: YOUNG, ELI
Address: 4844 HAMPSHIRE CT #103
City-St-Zip: NAPLES, FL 34112**Title:** SD () Delete
Name: EHRIE, MICHAEL
Address: 4843 HAMPSHIRE CT #305
City-St-Zip: NAPLES, FL 34112**Title:** TD () Delete
Name: RIEMER, FRANK
Address: 4833 HAMPSHIRE CT #207
City-St-Zip: NAPLES, FL 34112**Title:** VPD () Delete
Name: ORROW, ROYSTON JAMES
Address: 4844 HAMPSHIRE CT #305
City-St-Zip: NAPLES, FL 34112**Title:** D (X) Delete
Name: HARBRECHT, JOSEPH
Address: 4834 HAMPSHIRE CT #107
City-St-Zip: NAPLES, FL 34112**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**Title:** D (X) Change () Addition
Name: DAVIS, ROBERT
Address: 4844 HAMPSHIRE CT, #104
City-St-Zip: NAPLES, FL 34112**Title:** VPD (X) Change () Addition
Name: HARBRECHT, JOSEPH
Address: 4834 HAMPSHIRE CT, #107
City-St-Zip: NAPLES, FL 34112**Title:** TD (X) Change () Addition
Name: ORROW, ROYSTON JAMES
Address: 4844 HAMPSHIRE CT #305
City-St-Zip: NAPLES, FL 34112**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: ELI YOUNG

PD

04/26/2004

Electronic Signature of Signing Officer or Director

Date