

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01000008559

FILED
Apr 14, 2004
Secretary of State**Entity Name:** TOWN HOMES AT ONE KAPOK TERRACE ASSOCIATION, INC.**Current Principal Place of Business:**2180 W. SR 434, STE 5000
LONGWOOD, FL 327795044**New Principal Place of Business:**2180 W. SR 434
SUITE 5000
LONGWOOD, FL 327795044**Current Mailing Address:**2180 W. SR 434, STE 5000
LONGWOOD, FL 327795044**New Mailing Address:**2180 W. SR 434
SUITE 5000
LONGWOOD, FL 327795044**FEI Number:** 01-0553946**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**HART, JAMES W JR.
SENTRY MANAGEMENT INC
2180 W. SR 434, STE 5000
LONGWOOD, FL 327795044 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: D () Delete
Name: FARID, ASHRAF S
Address: 2650 PHILLIPPE PKWY.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D () Delete
Name: FARID, VIVIAN
Address: 2650 PHILLIPPE PKWY.
City-St-Zip: SAFETY HARBOR, FL 34695

Title: D () Delete
Name: HEINEN, MORCOS
Address: 9715 FRED ST.
City-St-Zip: HUDSON, FL 34669

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: JERNIGAN, TONI
Address: 1343-1 N MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33759

Title: VPD (X) Change () Addition
Name: SCHONBRUN, ED
Address: 1343-2 N MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33759

Title: STD (X) Change () Addition
Name: WAKELING, DOUGLAS
Address: 1347-1 N MCMULLEN BOOTH RD
City-St-Zip: CLEARWATER, FL 33759

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: TONI JERNIGAN

PD

04/14/2004

Electronic Signature of Signing Officer or Director

Date