

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N02000001047

**FILED**  
**Apr 26, 2004**  
**Secretary of State****Entity Name:** VALENCIA PHASE III PROPERTY OWNERS ASSOCIATION, INC.**Current Principal Place of Business:**2600 N. MILITARY TRAIL, STE. 100  
BOCA RATON, FL 33431**New Principal Place of Business:****Current Mailing Address:**2600 N. MILITARY TRAIL, STE. 100  
BOCA RATON, FL 33431**New Mailing Address:****FEI Number:** 20-0246827**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CORPORATION SERVICE COMPANY  
1201 HAYS ST.  
TALLAHASSEE, FL 32301 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: DURKIN, JR, WAREN J  
Address: 1110 NORTHCHASE PKW, SUITE 150  
City-St-Zip: MARIETTA, GA 33067

Title: D ( ) Delete  
Name: MCARTHUR, JASON  
Address: 1110 NORTHCHASE PKY SUITE 150  
City-St-Zip: MARIETTA, GA 30067

Title: D ( ) Delete  
Name: HINES, TIA  
Address: 1110 NORTHCHASE PKY SUITE 150  
City-St-Zip: MARIETTA, GA 30067

**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: BETH VOLLERO

CONT

04/26/2004

Electronic Signature of Signing Officer or Director

Date