

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

DOCUMENT# N03000000264

**FILED**  
**Apr 15, 2004**  
**Secretary of State**

**Entity Name:** THE ENCLAVE AT PALMIRA II CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

28341 S TAMIAM TRAIL STE 4  
BONITA SPRINGS, FL

**New Principal Place of Business:**

6702 LONE OAK BOULEVARD  
NAPLES, FL

**Current Mailing Address:**

28341 S TAMIAM TRAIL STE 4  
BONITA SPRINGS, FL

**New Mailing Address:**

FEI Number: 56-2313914      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

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

MATHIASON, MARION P  
500 E KENNEDY BLVD STE 200  
TAMPA, FL 33602 US

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

KOLEGUE, KENT  
6702 LONE OAKE BOULEVARD  
NAPLES, FL 34109 US

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: KENT KOLEGUE      04/15/2004  
\_\_\_\_\_  
Electronic Signature of Registered Agent      Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: KEARNS, PATRICK  
Address: 28341 S TIMIAM TR STE 4  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: VD ( ) Delete  
Name: THIRYACRE, KEN  
Address: 28341 S TAMIAM TRAIL STE 4  
City-St-Zip: BONITA SPRINGS, FL

Title: STD ( ) Delete  
Name: KUBIK, DOUG  
Address: 28341 S TAMIAM TRAIL STE 4  
City-St-Zip: BONITA SPRINGS, FL

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DP (X) Change ( ) Addition  
Name: VOGEN, B R  
Address: 28617 SAN LUCAS LANE #202  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: DV (X) Change ( ) Addition  
Name: DELRUSSO, ROBERT  
Address: 28617 SAN LUCAS LANE #102  
City-St-Zip: BONITA SPRINGS, FL 34134

Title: STD (X) Change ( ) Addition  
Name: MITCHELL, PAUL  
Address: 28617 SAN LUCAS LANE #201  
City-St-Zip: BONITA SPRINGS, FL 34134

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: B. RICHARD VOGEN      PRES      04/15/2004  
\_\_\_\_\_  
Electronic Signature of Signing Officer or Director      Date