## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N03000000626

FILED Jan 06, 2005 Secretary of State

Entity Name: 4550 HIGHWAY 20 EAST CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

NICEVILLE, FL 32578

Current Mailing Address: New Mailing Address:

4550 HWY 20 EAST 405 SPICEBUSH COURT SUITE E NICEVILLE, FL 32578

NICEVILLE, FL 32578

FEI Number: 51-0445818 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

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

RITZ, THOMAS A
4550 HWY 20 EAST
SUITE E
NICEVILLE, FL 32578 US

RITZ, THOMAS A
405 SPICEBUSH COURT
NICEVILLE, FL 32578 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: 01/06/2005

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

 Title:
 DP () Delete
 Title:
 DP (X) Change () Addition

 Name:
 WALKER, WAYNE
 Name:
 WALKER, WAYNE

 Address:
 234 RACETRACK RD NE
 Address:
 234 RACETRACK RD NE

City-St-Zip: FT WALTON BCH, GL 32547 City-St-Zip: FT WALTON BCH, FL 32547

Title: DV () Delete Title: DV (X) Change () Addition

Name: DEES, EARL Name: DEES, EARL

Address: 106 REGATTA DR Address: 419 WATERFALL TRAIL
City-St-Zip: NICEVILLE, FL 32578 City-St-Zip: WETUNPKA, AL 36093

Title: DST ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 RITZ, THOMAS
 Name:

 Address:
 405 SPICEBUSH CT.
 Address:

 City-St-Zip:
 NICEVILLE, FL 32578
 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: THOMAS A RITZ DST 01/06/2005