2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2004 8:00 am
Secretary of State
04-21-2004 90088 013 ****70.00

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1. Entity Name
HISTORIC PROSPECT PARK - MONCEAUX HOME OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3130 VINCENT ROAD WEST PALM BEACH, FL 33405	3130 VINCENT ROAD WEST PALM BEACH, FL 33405

02082004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
334 MARLBOROUGH ROAD	PO BOX 6354
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: WEST PALM BEACH, FL	City & State: WEST PALM BEACH, FL
Zip: 33405 Country: USA	Zip: 33405 Country: USA

4. FEI Number 13-4253183 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
GEARHART, BILL 3130 VINCENT ROAD WEST PALM BEACH, FL 33405	Name: RICHARD BROWN Street Address (P.O. Box Number is Not Accep: 334 MARLBOROUGH ROAD City: WEST PALM BEACH FL Zip Code: 33405

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: [signature] Richard Brown Secy/Director 4/16/04
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2004

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HOLVEY-LINDER, LESLIE 112 ROOSEVELT PLACE WEST PALM BEACH, FL 33405	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOLVEY-LINDER, LESLIE 112 ROOSEVELT PLACE WEST PALM BEACH, FL 33405	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD HOLLOWAY, MARION 3209 WASHINGTON ROAD WEST PALM BEACH, FL 33405	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HOLLOWAY, MARION 3209 WASHINGTON ROAD WEST PALM BEACH, FL 33405	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD STARBUCK, LORI 118 ROOSEVELT PLACE WEST PALM BEACH, FL 33405	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DENESS, STEVEN 3217 VINCENT ROAD WEST PALM BEACH, FL 33405	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MCLAUGHLIN, CAROL 232 MARLBOROUGH ROAD WEST PALM BEACH, FL 33405	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BROWN, RICHARD 334 MARLBOROUGH ROAD WEST PALM BEACH, FL 33405	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD GRAMMER, RHONDA 223 MONCEAUX ROAD WEST PALM BEACH, FL 33405	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D YOUNG, JAMES 3120 WASHINGTON ROAD WEST PALM BEACH, FL 33405	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: [signature] Marion Holloway 4-16-04 561-820-8109
SIGNATURE AND TYPED OR PRINTED NAME OF AUTHORIZED OFFICER OR DIRECTOR — Date — Daytime Phone #

President/Director