

**2004 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90057 035 ****61.25

DOCUMENT # N16058

1. Entity Name

LOST TREE CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

1-5 CHURCH LANE
NO. PALM BCH FL 33408
US

Mailing Address

P O BOX 14812
P.O. BOX 14812
N PALM BEACH FL 33408
US

94015466



MOORE CR2E037 (11/03)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

59-1606834

Applied For

Not Applicable

Zip

Country

Zip

Country

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

ROZELLE, PATRICIA
283 BOUGAINVILLEA DRIVE
JUPITER FL 33458

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: 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	DELETE	TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	CHANGE	ADDITION
STD	ROESSNER, GILBERT	2 CHURCH LANE #120-121	NORTH PALM BEACH FL 33408	<input checked="" type="checkbox"/>	D	ANN GEHARKE	3 CHURCH LANE - #135	NA PALM BEACH, FL 33408	<input type="checkbox"/>	<input checked="" type="checkbox"/>
D	KEEGAN, JOHN	5 CHURCH LANE, #159	NORTH PALM BEACH FL 33408	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
PD	PETIT, HAROLD	4 CHURCHLANE #137/138	NORTH PALM BEACH FL 33408	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
AS	ROZELLE, PATRICIA	283 BOUGAINVILLEA DRIVE	JUPITER FL 33458	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
VP	INGHAM, HARVEY	3 CHURCH LANE 127	NORTH PALM BEACH FL 33408	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>
D	GREER, MARY THERESE	5 CHURCH LANE, #151/152	NORTH PALM BEACH FL 33408	<input type="checkbox"/>					<input type="checkbox"/>	<input type="checkbox"/>

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: *Patricia Rozelle* **PATRICIA ROZELLE** 2-9-04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #