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

FILED Mar 08, 2004 08:00 AM DOCUMENT # N17439 **Secretary of State** 1. Entity Name MILITARY TRAIL WAREHOUSE CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address 6758 N MILITARY TR 6758 N MILITARY TR SUITE 301 W PALM BEACH FL 33407 SUITE 301 W PALM BEACH FL 33407 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For NO-T APPLICABLE Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KELLER, FRED Street Address (P.O. Box Number is Not Acceptable) 6758 N MILITARY TR SUITE 301 WEST PALM BEACH FL 33407 City 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 \$5.00 May Be FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State OFFICERS AND DIRECTORS 10. 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Delete TITLE ☐ Change Addition KELLER, FRED NAME NAME U00000081668 6758 N MILITARY TR SUITE 301 STREET ADDRESS STREET ADDRESS 03/08/04-80158-021 61.25 W. PALM BCH, FL 33407 CITY - ST- ZIP CITY-ST-ZIP ☐ Delele TITLE TITLE ☐ Change ☐ Addition KORTE, KEMBER NAME 6758 N MILITARY TRAIL #301 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33407 CITY - ST- ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition KNAPP, AMY NAME NAME 6758 N MILITARY TR SUITE 301 STREET ADDRESS STREET ADDRESS WEST PALM BEACH FL 33407 CITY-ST-ZIP CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ■ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-SI-ZIP TITLE ☐ Delete ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. Thereby 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 attactment with an address, with any other like empowered. with at other like empowered. KEMBER KARK, Y.P.

SIGNATURE:

2/20/04 561-845-99/1