

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19481

FILED
Apr 27, 2004
Secretary of State

Entity Name: COVERED BRIDGE AT CURRY FORD WOODS ASSOCIATION, INC.

Current Principal Place of Business:

882 JACKSON AVE.
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

882 JACKSON AVE.
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-2847791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDERVLIT, AMANDA M
882 JACKSON AVE.
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD (X) Delete
Name: AVERILL, SCOTT
Address: 2814 CURRY VILLAGE LN.
City-St-Zip: ORLANDO, FL 32822

Title: VD () Delete
Name: DEALMEIDA, MARIA
Address: 7886 SAGEBRUSH PL
City-St-Zip: ORLANDO, FL 32822

Title: STD (X) Delete
Name: ROTOND, CHERYL
Address: 2940 CURRY VILLAGE LN.
City-St-Zip: ORLANDO, FL 32822

Title: D () Delete
Name: GATELL, LIZA
Address: 7808 CURRY VILLAGE LN.
City-St-Zip: ORLANDO, FL 32822

Title: D (X) Delete
Name: TUTTY, LOURAINÉ
Address: 7888 SAGEBRUSH PL
City-St-Zip: ORLANDO, FL 32822

Title: SD (X) Delete
Name: KNERR, JENNIFER
Address: 7902 SAGEBRUSH ST
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change () Addition
Name: DEALMEIDA, MARIA
Address: 7886 SAGEBRUSH PL
City-St-Zip: ORLANDO, FL 32822

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: PD (X) Change () Addition
Name: GATELL, LIZA
Address: 7808 CURRY VILLAGE LN.
City-St-Zip: ORLANDO, FL 32822

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
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: LIZA GATELL

PD

04/27/2004

Electronic Signature of Signing Officer or Director

Date