

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90456 022 ****61.25

**2004 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

44036479



DOCUMENT # N23712 1. Entity Name ARENA DE MADEIRA CONDOMINIUM, INC.			
Principal Place of Business ARENA DE MADEIRA 14110 GULF BLVD. MADIERA BEACH, FL 33708 US		Mailing Address 300 S. DUNCAN AVE., STE 220B CLEARWATER, FL 33755 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip		Zip	
Country		Country	
		04212004 Chg-NP CR2E037 (10/03)	
		4. FEI Number 59-2110732	
		Applied For Not Applicable	
		5. Certificate of Status Desired <input type="checkbox"/> \$8:75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
COMMONS, RICHARD C PA 300 S. DUNCAN AVE., STE 220B CLEARWATER, FL 33755		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	<input checked="" type="checkbox"/> Delete BATE, PAT 231 BALLANTRAE LANE HOUSTON, TX 77015	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Pat Bate 231 Ballantrae Lane Houston, TX 77015
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete T BROWN, LYNN 520 MACDONALD ROAD OAKVILLE, ONTARIO,	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition P Roger Bate 231 Ballantrae Lane Houston, TX 77015
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete P WHITE, GAIL 2902 W. BAY VILLA AVENUE TAMPA, FL 33611	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition V Stephen Carter 202 Inglewood Dr. Fredericton, New Brunswick, Canada E2B2K6
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete VPD BROWN, MARTIN 520 MACDONALD RD OAKVILLE, ONTARIO, CANADA, l6j 2b9	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition S Martin Brown 520 McDonald Rd. Oakville, Ontario, Canada L6J2B9
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Delete VPD CLARK, ARTHUR 14110 GULF BLVD., #301 MADIERA BEACH, FL 33708	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <u>Roger A. Bate / Roger A. Bate</u>		Date: <u>4-21-04</u> Daytime Phone #: <u>713/455-2027</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	