

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

FILED
Mar 12, 2004 8:00 am
Secretary of State

03-12-2004 90003 004 ****61.25

DOCUMENT # N33230 1. Entity Name SOUTHWOOD, BLOCK 3 HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 2477 STICKNEY POINT STE 118A SARASOTA FL 34231 US			Mailing Address 2477 STICKNEY POINT STE 118A SARASOTA FL 34231 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address 153 CENTER RD. Suite, Apt. #, etc.			
City & State Zip		City & State VENICE FL Zip 34285		Country U.S.A.	
4. FEI Number 65-0154227				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				MOORE CR2E037 (11/03)	
6. Name and Address of Current Registered Agent ARGUS PROPERTY MANAGEMENT ARGUS MANAGEMENT 2477 STICKNEY POINT VENICE FL-34293			7. Name and Address of New Registered Agent Name ARGUS PROPERTY MANAGEMENT Street Address (P.O. Box Number is Not Acceptable) 2477 STICKNEY POINT ROAD STE 118 A City SARASOTA FL Zip Code 34231		
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	PD MACLEOD, DEAN 4886 TAMARACH TRAIL VENICE FL 34293	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Donna Stacy 4283 Spice Tree St Venice, FL 34293	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD BRADY, LEN 4836 TAMAROAD TRAIL VENICE FL 34293	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Len Brady 4836 Tamaroad trail Venice, FL 34293	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD MILLER, FREDA 4868 ORANGE TRE PLACE VENICE FL 34293	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD Freda Miller 4868 Orange tree place Venice FL 34293	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOSEL, ELIZABETH 4236 SUMMERFIELD RD. VENICE FL 34293	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD Elizabeth Bosel 4236 Summerfield Dr Venice, FL 34293	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CASUCCI, FRANK 4283 SPICETREE ST VENICE FL 34293	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Len Brady 4836 Tamaroad Tr Venice, FL 34293	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	☐ 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: <i>Freda M. Miller</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					