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

FILED May 03, 2004 8:00 am Secretary of State DOCUMENT # N34157 1. Entity Name 05-03-2004 90423 001 ****61.25 BRANTLEY COMMONS CONDOMINIUM ASSOCIATION. Principal Place of Business Mailing Address % CHRISTOPHER B. HOEK 1537 BRANTLEY RD % CHRISTOPHER B. HOEK 1537 BRANTLEY RD FORT MYERS FL 33907-3923 FORT MYERS FL 33907-3923 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 59-2013100 Not Applicable Zip Country 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 HOEK, CHRISTOPHER B. Street Address (P.O. Box Number is Not Acceptable) 1537 BRANTLEY RD FORT MYERS FL 33907 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) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. PD TITLE Delete TITLE ☐ Change ☐ Addition ANDERSON, STEPHEN F. NAME NAME 1537 BRANTLEY RD STREET ADDRESS STREET ADDRESS FORT MYERS FL CITY-ST-ZIP CITY-ST-ZIP SD TITLE ☐ Delete TITLE ☐ Change Addition HOEK, CHRISTOPHER B. NAME NAME BRANTLEY RD STREET ADDRESS STREET ADDRESS FORT MYERS FL CITY-ST-ZIP CITY-ST-ZIP D TITLE ☐ Delete TITLE Change ☐ Addition METZ, DKJ NAME NAME 6321 DANIELS PKWY STREET ADDRESS STREET ADDRESS FORT MYERS FL 33912 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition ATKINSON, PAUL NAME 1537 BRANTLEY RD #3 STREET ADDRESS STREET ADDRESS FORT MYERS FL 33907 CITY-ST-ZIP CITY-ST-7IP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change Addition NAME NAME

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.

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

Date