2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 17, 2005 8:00 am Secretary of State 03-17-2005 90022 031 ****61.25

1. Entity Nam	MENT # N38259 "S RESERVE II CONDOM!	INIUM ASS	OCIATION,					03-17-20	03 300	J22 (J)	. 01	.23
Principal Place of Business ATTWOOD PHILLIPS, INC ATTWOOD PHILLIPS, INC 1350 ORANGE AVE #100 WINTER PARK, FL 32789 US Mailing Address ATTWOOD PHILLIPS, INC 1350 ORANGE AVE #100 WINTER PARK, FL 32789 US												
2. Principal F	Place of Business	3. Mailing	3. Mailing Address									
Suite, Apt.	. #, etc.	Suite, Apt. #, etc.			-		01242005	Chg-NP		CR2E03	7 (10/03)	
City & Stat	te	City & State				4. FEt Numb 59-308					Applied For Not Applicable	
Zip Country		Zip	Zip		country		5. Certificate	e of Status Des	sired		\$8.75 Ad Fee Requir	
	6. Name and Address of Curren	t Registered A	gent				7. Name and	d Address of I	New Re	gistered /	gent	
PHILLIPS,	, ROGER V				Name							
C/O ATTWOOD PHILLIPS, INC 1350 ORANGE AVE #100					Street A	Street Address (P.O. Box Number is Not Acceptable)						
WINTER F	PARK, FL 32789				City			··· ··			Zip Co	de
	e named entity submits this statement tions of registered agent.	for the purpose	of changing its	register	ed office o	r register	ed agent, or bo	oth, in the State	e of Flori	da.lam i	amiliar wit	n, and accept
SIGNATURE	Signature, typed or printed name of registered age	nl and title it apolicab		O(-1	d Aped slope							
ř			40. (14O1E:	Redistate	a Agail signed	rure required	when reinstating)			DATE	•	
	Filing Fee Is \$61.25 Due by May 1, 2005		9. Election Cam Trust Fund Co	paign F	inancing	TI 8 required	\$5.00 May I Added to Fees	Be		ke check la Depar	payable ment of	
10.			9. Election Cam	paign F	inancing		\$5.00 May I	3	Florid	ke checi la Depar	ment of	State
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TITLE NAME STREET ADDRESS	PD AYOTTE, JULIE 129 PRESERVE CIR #201		9. Election Cam Trust Fund Co	paign Fontribut 11. TITLE NAM STRE	EET ADDRESS		\$5.00 May I Added to Fees	3	Florid	ke checi la Depar	RECTORS	State N 10
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I nereby ceruly 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.