

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39205

Entity Name: ARMISTEAD CIVIC ASSOCIATION, INC.

FILED  
Sep 02, 2004  
Secretary of State

## Current Principal Place of Business:

C/O MICHAEL COUREY  
16135 ARMISTEAD LN  
ODESSA, FL 33556 US

## New Principal Place of Business:

16128 ARMISTEAD LANE  
ODESSA, FL 33556 US

## Current Mailing Address:

C/O MICHAEL COUREY  
16135 ARMISTEAD LANE  
ODESSA, FL 33556 US

## New Mailing Address:

C/O RYAN BOSE  
16128 ARMISTEAD LANE  
ODESSA, FL 33556 US

FEI Number: 59-3021027

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

## Name and Address of Current Registered Agent:

COUREY, MICHAEL  
16135 ARMISTEAD LANE  
ODESSA, FL 33556 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 ( ) Delete  
Name: COUREY, MICHAEL  
Address: 16135 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

Title: VD ( ) Delete  
Name: DIXON, CAROL A  
Address: 16112 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

Title: SD ( ) Delete  
Name: LEATHERMAN, SUE  
Address: 16201 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

Title: TD ( ) Delete  
Name: JEPPESEN, ELLEN R  
Address: 16126 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: SD (X) Change ( ) Addition  
Name: COUREY, MICHAEL  
Address: 16135 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

Title: VD (X) Change ( ) Addition  
Name: MAHER, SUE  
Address: 16133 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

Title: PD (X) Change ( ) Addition  
Name: BOSE, RYAN  
Address: 16128 ARMISTEAD LANE  
City-St-Zip: ODESSA, FL 33556

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: RYAN BOSE

P

09/02/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date