

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

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-15-2004 90048 049 ****61.25

DOCUMENT # N39296

1. Entity Name

FIG TREE VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

12600 NW HARBOUR RIDGE BLVD
PALM CITY FL 34990
US

Mailing Address

12600 NW HARBOUR RIDGE BLVD
PALM CITY FL 34990
US

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

65-0208480

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEARY, MICHAEL E
12600 NW HARBOUR RIDGE BLVD
PALM CITY FL 34990

7. Name and Address of New Registered Agent

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

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

TITLE PD ☒ Delete
NAME MURRAY, JOHN J
STREET ADDRESS 13005 HARBOUR RIDGE BLVD
CITY-ST-ZIP PALM CITY FL 34990

TITLE VD ☒ Delete
NAME DEISLER, JOSEPH P
STREET ADDRESS 13002 HARBOUR RIDGE BLVD
CITY-ST-ZIP PALM CITY FL 34990

TITLE DST ☐ Delete
NAME KERREBROCK, GLEN
STREET ADDRESS 13013 HARBOUR RIDGE BLVD
CITY-ST-ZIP PALM CITY FL 34990

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE DP ☒ Change ☐ Addition
NAME Kerrebrock, Glen
STREET ADDRESS
CITY-ST-ZIP

TITLE DS ☐ Change ☒ Addition
NAME Friese, Patricia
STREET ADDRESS 13006 Harbour Ridge Blvd.
CITY-ST-ZIP Palm City, FL 34990

TITLE DT ☐ Change ☒ Addition
NAME Kueth, C. William
STREET ADDRESS 13003 Harbour Ridge Blvd.
CITY-ST-ZIP Palm City, FL 34990

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Glen Kerrebrock
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/14/04

Date

Daytime Phone #