
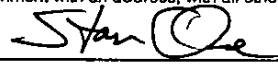


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2005 8:00 am
Secretary of State

04-11-2005 90173 015 ****61.25

DOCUMENT # N41311					
1. Entity Name OWNERS' ASSOCIATION AT NORTH BEACH VILLAGE, INC.					
Principal Place of Business 4301 32ND STREET WEST SUITE A-19 BRADENTON, FL 34205		Mailing Address 4301 32ND STREET WEST SUITE A-19 BRADENTON, FL 34205			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0233693	
				Applied For <input type="checkbox"/> Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
THOMPSON, STEPHEN ESQ 1205 MANATEE AVE W BRADENTON, FL 34205			Name		
			Street Address (P.O. Box Number is Not Acceptable)		
			City		
			FL		
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	ORE, STAN	NAME			
STREET ADDRESS	6250 HOLMES BLVD., #47	STREET ADDRESS			
CITY-ST-ZIP	HOLMES BEACH, FL 34217	CITY-ST-ZIP			
TITLE	DV <input type="checkbox"/> Delete	TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MIZZI, DOROTHY	NAME	MIZZI, DOROTHY		
STREET ADDRESS	6250 HOLMES BLVD., #34	STREET ADDRESS	6250 Holmes Blvd #34		
CITY-ST-ZIP	BRADENTON BEACH, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217		
TITLE	DS <input checked="" type="checkbox"/> Delete	TITLE	DS <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	FLYNN, HELEN	NAME	Fleisch, JACK		
STREET ADDRESS	6250 HOLMES BLVD., #43	STREET ADDRESS	6250 Holmes Blvd #70		
CITY-ST-ZIP	BRADENTON BEACH, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217		
TITLE	DT <input type="checkbox"/> Delete	TITLE	DT <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SNYDEK, WILLIAM	NAME	SNYDER, WILLIAM		
STREET ADDRESS	6250 HOLMES BLVD., #26	STREET ADDRESS	6250 Holmes Blvd #26		
CITY-ST-ZIP	HOLMES BEACH, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217		
TITLE	D <input type="checkbox"/> Delete	TITLE	DV <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	KORTIS, HOWARD	NAME	NEVANS, LAUNEL		
STREET ADDRESS	6250 HOLMES BLVD., #41	STREET ADDRESS	6250 Holmes Blvd #23		
CITY-ST-ZIP	HOLMES BEACH, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217		
TITLE	D <input checked="" type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	MARSICANO, JEAN	NAME	Hosking, Jean Mary		
STREET ADDRESS	6250 HOLMES BLVD., #33	STREET ADDRESS	6250 Holmes Blvd #49		
CITY-ST-ZIP	HOLMES BEACH, FL 34217	CITY-ST-ZIP	Holmes Beach, FL 34217		
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: 		Date: 7 APR 2005			
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Daytime Phone #			

50035636



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