2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N41864

MOBILAND BY THE SEA HOMEOWNERS ASSOCIATION,



Principal Place of Business

Mailing Address

2101 MOBILAND DRIVE MELBOURNE, FL 32935

2101 MOBILAND DRIVE MELBOURNE, FL 32935

May 10, 2004 8:00 am Secretary of State

05-10-2004 90479 031 ****61.25



04282004 No Chg-NP

CR2E037 (10/03)

4. FEI Number 59-3106726 Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

DO NOT WRITE IN THIS SPACE

RAWLINS, MILDRED

	BILAND DRIVE RNE, FL 32935			IN THIS		
	named entity submits this statement for the pations of registered agent.	ourpose of changing its registere	ed office or registered ag	ent, or both, in the Sta	te of Florida. I am fam	iliar with, and accept
	Signature, typed or printed name of registered agent and title	if applicable. (NOTE: Registered	d Agent signature required when re	einstating)	* DATE	
	Filing Fee is \$61.25 Due by May 1, 2004	9. Election Campaign Finan Trust Fund Contribution.	ocing \$5.00 M Added to F			
10.	OFFICERS AND DIREC		er en		<u> </u>	
TITLE NAME Street address City-St-Zip	MELBOURNE, FL 32935 VD BATCHELOR, ELIZABETH 2104 MOBILAND DRIVE MELBOURNE, FL 32935					
TITLE NAME Street Address City-St-Zip						A MARIE
TITLE Name Street address City-St-Zip	SD RAWLINS, MILDRED 2101 MOBILAND DRIVE MELBOURNE, FL 32935			DO NOT	WRITE	
TITLE NAME Street Address City-St-Zip	TD SEDOR, STEVEN 4455 UTICA CIRCLE MELBOURNE, FL			IN THIS	SPACE	
TITLE Name Street address City-St-Zip	D CARD, ROGER 2119 MOBILAND DRIVE MELBOURNE, FL					

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.

NAME STREET ADDRESS CITY-ST-ZIP

321-242-2349

4445270 april 24,04 Vear Reople: am sending you cheer 2 61.25 Filing Fee for It appears that we mise placed or lost the U.B.R Form, Please send the form to mobiland By The Sea Homeowners assoc Imes 2101 Mobiland Drive Melloume, Fl. 32935-4871 We phoned your office Sincerely yours