

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Apr 16, 2004
Secretary of State**

DOCUMENT# N94000005622

Entity Name: OSPREY POINTE AT DOLPHIN CAY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

4801 OSPREY DRIVE S.
SAINT PETERSBURG, FL 33711 US

New Principal Place of Business:

Current Mailing Address:

4779 DOLPHIN CAY LANE S.
SAINT PETERSBURG, FL 33711 US

New Mailing Address:

FEI Number: 59-3278867 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CONDOMINIUM ASSOCIATES
3001 EXECUTIVE DRIVE
SUITE 260
CLEARWATER, FL 33762 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: TD () Delete
Name: ROSS, IKE
Address: 4801 OSPREY DRIVE S. #402
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: PD () Delete
Name: PFAUSER, JACK
Address: 4850 OSPREY DRIVE S. #304
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: D () Delete
Name: HOLT, KEVIN
Address: 4850 OSPREY DRIVE S. #403
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: SD () Delete
Name: KALL, JOHN
Address: 4830 OSPREY DRIVE S. #304
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: VD () Delete
Name: ALESI, VINCENT
Address: 4830 OSPREY DRIVE S. #204
City-St-Zip: SAINT PETERSBURG, FL 33711

Title: D () Delete
Name: CORNELLY, JUDY
Address: 4850 OSPREY DRIVE S. #606
City-St-Zip: SAINT PETERSBURG, FL 33711

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: JACK PFAUSER

PD

04/16/2004

Electronic Signature of Signing Officer or Director

_____ Date

DAVID BYE, D
4850 OSPREY DRIVE S
ST PETERSBURG, FL 33711