

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Jul 06, 2004
Secretary of State**

DOCUMENT# N94000006278

Entity Name: APOLLO BEACH WATERWAY IMPROVEMENT GROUP, INC.

Current Principal Place of Business:

ROBERT H. MOHR, ATTORNEY
137 S PEBBLE BEACH BLVD #100
SUN CITY CENTER, FL 335735708 US

New Principal Place of Business:

Current Mailing Address:

ROBERT H. MOHR, ATTORNEY
137 S. PEBBLE BEACH BLVD #100
SUN CITY CENTER, FL 335735708 US

New Mailing Address:

FEI Number: 59-3292113 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MOHR, ROBERT H
CORPORATE CENTER, SUITE 100
137 S. PEBBLE BEACH BLVD.
SUN CITY CENTER, FL 335735708 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: HAGGARD, BOB
Address: 6522 SOLITAIRE PALM WAY
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: SD () Delete
Name: LITTLE, TOM
Address: 6502 SANTIAGO COURT
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: VD () Delete
Name: NORMAN, OLIVER
Address: 907 GOLF ISLAND DRIVE
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: TD () Delete
Name: SMOLENSKI, JOHN
Address: 736 JAMAICA CIRCLE WEST
City-St-Zip: APOLLO BEACH, FL 33572 US

Title: D () Delete
Name: ROBERTS, JERRY
Address: 6413 RUBIA CIRCLE
City-St-Zip: APOLLO BEACH, FL 33572 US

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
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: JOHN V. SMOLENSKI

TD

07/06/2004

Electronic Signature of Signing Officer or Director

_____ Date