

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 16, 2004 8:00 am
Secretary of State

03-16-2004 90023 049 ****61.25

DOCUMENT # N95000001488 1. Entity Name THE ISLANDS AT WESTON MAINTENANCE ASSOCIATION, INC.					
Principal Place of Business 3300 CORPORATE AVE 110 WESTON, FL 33331 US			Mailing Address 3300 CORPORATE AVE 110 WESTON, FL 33331 US		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0473647	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent ROSEN, HARRY M 2500 WESTON RD SUITE 220 WESTON, FL 33331				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					
Filing 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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD OLSON, GLEN 1362 GINGER CIRCLE WESTON, FL 33326	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Zuckerman, Ira 3300 Corporate Ave, #110 Weston, FL 33331	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD RAIMAN, JOYCE 1373 CORNELLIA CIRCLE WESTON, FL 33326	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP May, Lawrence 3300 Corporate Ave, #110 Weston FL 33331	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SALAS, PATTY 1368 GINGER CIRCLE 3300 Corporate Ave #110 WESTON, FL 33326	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T. Powell, Carolyn 3300 Corporate Ave, #110 Weston FL 33331	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	X D RICHENSTEIN, KEN 4489 LANTANA CT 3300 Corporate Ave #110 WESTON, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Richenstein, Ken 3300 Corporate Ave, #110 Weston FL 33331	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MELLINGER, AMY 1272 CAMELLIA LANE WESTON, FL 33326	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Gach, Louis 3300 Corporate Ave, #110 Weston FL 33331	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S GOLDSTEIN, ALVIN 1599 ISLAND WAY WESTON, FL 33326	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Goldstein, Alvin 3300 Corporate Ave #110 Weston, FL 33331	☒ Change ☐ Addition
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: <u>Patricia A. Chas</u> 3/12/04 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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