2004-NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

FILED Apr 29, 2004 8:00 am DOCUMENT # N95000005229 Secretary of State 1. Entity Name 04-29-2004 90304 038 ****61.25 HOLMES BEACH CIVIC ASSOCIATION, INC. Principal Place of Business, 1 Mailing Address P.O. BOX 1944 HOLMES BEACH FL 34218 ISLAND BRANCH LIBRARY . . ? 5701 MARINA DRIVE HOLMES BEACH FL 34217 3. Mailing Address 2. Principal Place of Business Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 65-0623626 Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name -- 5-AMC ROMBERGER, SHIRLEY D Street Address (P.O. Box Number is Not Acceptable) **512-71 ST STREET BRADENTON BEACH FL 34217** City Zio Code 8. The above named atity 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 Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Florida Department of State Due By May 1, 2004 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11. TITLE ☐ Delete TITLE SHIRLEY D. ROMBERGER 512-7155 ST WIEDORN, AL NAME NAME 7007 GULF DR STREET ADDRESS STREET ADDRESS HOLMES BEACH, FL 34217 HOLMES BCH FL 34217 CITY-ST-ZIP CITY-ST-7IP Change Addition Delete TITLE TITLE STRICKLAND LOUIE 3104 AVE E EARLY, JANE NAME NAME 4307 GULF DR STREET ADDRESS STREET ADDRESS HOLMES BCH FL 34217 HOLMES BEACH FL 34217 CITY-ST-71E CITY-ST-ZIP TITLE ☐ Detete STRICKLAND, MARY NAME 3104 AVE E STREET ADDRESS STREET ADDRESS HOLMES BCH FL 34217 CITY-ST-ZIP CITY-ST-ZIP D GELDERMAN FLORENCE 509-74TH ST Delete Change ☐ Addition TITLE TITLE STRICKLAND, LOVIE NAME NAME 3104 AVE E STREET ADDRESS STREET ADDRESS HOLMES BCH FL 34217 HOLMES BEACH, FL 34217 CITY-ST-ZIP CITY-ST-ZIP Addition ☐ Delete TITLE HINES, BARBARA CARNES, MARTHA NAME NAME 600 MANATEE AVE 227 STREET ADDRESS STREET ADDRESS HOLMES BCH FL 34217 CITY-ST-ZIP HOLMES BEACH , FL 34217. CITY-ST-ZIP Delete TITLE ☐ Addition THORNBURG, MERCEDES NAME NAME 528 72ND STREET STREET ADDRESS STREET ADDRESS HOLMES BEACH FL 34217 CITY-ST-ZIP CITY-ST-ZIP

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: SHIRLEY D. ROMBERGER SEC Skiely D. Rowlinger 4-26-04
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daving Play