2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000002459

City-St-Zip:

ST PETERSBURG, FL 33716

Entity Name: TIDES BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

FILED Apr 30, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business: 16650 GULF BLVD NORTH REDINGTON BEACH, FL 33708 **Current Mailing Address: New Mailing Address:** RAMPART PROPERTIES 10033 9TH STREET N. ST PETERSBURG, FL 33716 FEI Number: 59-3511305 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: SMITH, BRIAN % RAMPART PROPERTIES 10033 9TH STREET N. ST PETERSBURG, FL 33716 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BENNETT, MARY Name: Name: 10033 9TH STREET N. Address: Address: City-St-Zip: ST PETERSBURG, FL 33716 City-St-Zip: Title: () Delete Title: (X) Change () Addition SUZANSKI, STEVE Name: ROUSE, DONALD Name: Address: 10033 9TH STREET N., 2ND FL Address: 10033 9TH STREET N., 2ND FL City-St-Zip: ST PETERSBURG, FL 33716 City-St-Zip: ST PETERSBURG, FL 33716 Title: () Delete Title: () Change () Addition WALKER, DENNY Name: Name: Address: 10033 9TH STREET N., 2ND FL Address: City-St-Zip: ST PETERSBURG, FL 33716 City-St-Zip: () Delete Title: TD Title: () Change () Addition LAU, PHIL Name: Name: 10033 9TH STREET N., 2ND FL Address: Address: City-St-Zip: ST PETERSBURG, FL 33716 City-St-Zip: Title: VPD () Delete Title: VPD (X) Change () Addition LYKES, H. TYSON SUZANSKI, STEVE Name: Name: 10033 9TH STREET N., 2ND FL 10033 9TH STREET N., 2ND FL Address: Address:

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.

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ST PETERSBURG, FL 33716

SIGNATURE: MARY BENNETT PD 04/30/2004