## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000002783

Entity Name: OSPREY POINT HOMEOWNERS, INC.

FILED Jan 29, 2004 Secretary of State

Current Principal Place of Business: New Principal Place of Business:

307 OLD OAK CR 981 BAYOU LANE PALM HARBOR, FL 34683 PO BOX 241

CRYSTAL BEACH, FL 34681

Current Mailing Address: New Mailing Address:

307 OLD OAK CR PO BOX 241

PALM HARBOR, FL 34683 CRYSTAL BEACH, FL 34681

FEI Number: 59-3513084 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:

GRIFFIN, WILLIAM TERRY, JAMES 307 OLD OAK CR 981 BAYOU LANE

PALM HARBOR, FL 34683 CRYSTAL BEACH, FL 34681

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: JAMES TERRY 01/29/2004

Electronic Signature of Registered Agent Date

## OFFICERS AND DIRECTORS:

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

tle: PD ( ) Delete Title: PRES (X) Change ( ) Addition

 Name:
 GRIFFIN, WILLIAM
 Name:
 TERRY, JAMES

 Address:
 307 OLD OAK CIRCLE
 Address:
 981 BAYOU LANE / PO BOX 79

 City-St-Zip:
 PALM HARBOR, FL 34683
 City-St-Zip:
 CRYSTAL BEACH, FL 34681

 Name:
 HUNT, CHARLES
 Name:
 HEIDTMAN, CYNTHIA

 Address:
 PO BOX 130
 Address:
 189 E CANAL DR

City-St-Zip: CRYSTAL BEACH, FL 34681 City-St-Zip: PALM HARBOR, FL 34684

Title: SD ( ) Delete Title: ( ) Change ( ) Addition

 Name:
 GAIL, JAMES
 Name:

 Address:
 P.O. BOX 189
 Address:

 City-St-Zip:
 CRYSTAL BEACH, FL 34681
 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: JAMES L. GAIL SD 01/29/2004