## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Mar 16, 2005 8:00 am Secretary of State

ANNUAL REPURI							7,1			,	4	
DOCUMENT # N9800005207  1. Entity Name						Secretary of State 03-16-2005 90028 019 ****61.25						
FIDDLER'S BEND CONDOMINIUM ASSOCIATION, INC.							0.5	10 2003 5	0020 019	01.	<b>2</b> 5	
2810 FIDDLERS BEND PO I		lailing Address PO BOX 191 PALMETTO, FL 34220			1 ( <b>18</b> 11/48) <b>1</b> (18 (8/8)	LEIM BEIN EEIM EEN	T ÆSIN GSISI ŠYNS KSIN	a a maa	Kiri di (P64			
2. Principal Place of Business 3. Mail			failing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				03072005 <sub>CI</sub>	ng-NP	CR2E037 (10	/03)		
City & State			City & State				4. FEI Number 65-087745	6		<del></del>	plied For	
Zip	Zip Country		ip Co		ntry		5. Certificate of Status Desired			5 Add	litional	
<del></del>	6. Name and Address of Curr	ent Realstern	d Agent			,	7. Name and Add	ress of New R				
DENTON, JACQUELINE C					Name		7. Hallo and Address of New Hogastook Agent					
2810 FIDE PALMETT		Street Address			P.O. Box Number is I	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.										and accept		
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, 2005			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/CHANG	ES TO OFFICE	RS AND DIRECTO	RS IN	10	
TITLE	PD HUESING, PATRICIA M		Delete	TITLE		PD	E. GERALD	<i>L</i> .	<b>X</b> 0	nange	Addition	
STREET ADDRESS	2919 FIDDLERS BEND				et adoress	290	3 FIODLER.	S BEND				
CITY-ST-ZIP	PALMETTO, FL 34221			CITY	-\$1-2IP	PALI	METTO, FL	3422				
NAME	VD VOYE, G		Delete	TITLE NAMI	:	DAD	Num Juni	TH	Ø(a	range	Addition	
STREET ADDRESS	2903 FIDDLERS BEND				ET ADDRESS		NUM, JUDIE					
CITY-ST-ZIP	PALMETTO, FL 34221			CITY	-ST-ZIP	PAL	METTO, F	L 342	21			
TITLE NAME	TD DENTON, J		☐ Delete	TITLE			ŕ		C	nange	Addition .	
STREET ADDRESS	2810 FIDDLERS BEND				ET ADDRESS							
CITY-ST-ZIP	PALMETTO, FL 34221			CITY-	-ST-ZIP						<u> </u>	
TITLE NAME	SD ZORENS, P		Delete	TITLE					□ c	nange	Addition	
STREET ADDRESS CITY-ST-ZIP	2904 FIDDLERS BEND PALMETTO, FL 34221			STRE	- et address - St-Zip							
TITLE	DD DD		Delete	TITLE		DD			<b>5</b> (0	hange	☐ Addition	
NAME	HARDER, H		T	NAME	E	KEN	NEDY, GLE 5 FIDDLERS	N BEND	77.			
STREET ADDRESS CITY-ST-ZIP	2921 FIDDLERS BEND PALMETTO, FL 34221				ET ADDRESS • ST - ZIP	PAI	METTO, F	1 217	21			
TITLE			☐ Delete	TITLE		17%	111=110, 5	~ 370		hance	☐ Addition	

12. I hereby certify that the information supplied with this filling 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 attackment with an address, with all other like empowered.

STREET ADDRESS

CITY-ST-ZIP

NAME Street adoress

CITY-ST-ZIP

SIGNATURE: Jacqueline C. Weston JACQUELINE C. DENTON 3/14/05 (941) 721-4773

Design TURE AND TYPED OR PRINTED IN AUGUS OF SIGNING OFFICER OR CIRECTOR