## 2004 NOT-FOR-PROFIT CORPORATION

## **ANNUAL REPORT**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OF SIRECTOR

DOCLIMENT # NIGROUDOE460

## **FILED** Jul 12, 2004 8:00 am Secretary of State

| 1. Entity Name VANDERBILT COMMUNITY ASSOCIATION, INC. |   |  |                         |   |   |  |   |  | 07-12-2   | 004 90018   | 8 043 ***   | *61.25                                  |
|---|---|--|-------------------------|---|---|--|---|--|---|---|---|---|
| 8250 DANBURY BLVD 82                                  |   |  |                         | ailing Address<br>1250 DANBURY BLVD<br>IAPLES, FL 34120 |   |  |   |  |   |   |   |   |
|   |   |  |                         | Mailing Address   |   |  |   |  |   |   |   |   |
| Suite, Apt. #, etc.                                   |   |  | Sı                      | Suite, Apt. #, etc.                                     |   |  |   | 06302004 C   | hg-NP   | CR2E037   | 7 (10/03)   |   |
| City & State  |   |  | С                       | City & State  |   |  |   | 4. FEI Number 59-352048  | 31  |   | _ <del>                                    </del> | plied For<br>t Applicable               |
| Zip   | Country   |  | Zi                      | Zip   |   | Country                                  |   | 5. Certificate of S  | tatus Desired                                       |   | 8.75 Add<br>ee Required                           |   |
| 6. Name and Address of Current Register               |   |  |                         |   |   |  | 7. Name and Address of New Registered Agent |  |   |   |   |   |
| BUSH, ROBERT<br>8250 DANBURY BLVD<br>NAPLES, FL 34120 |   |  |                         |   | Name Street Address (P.O. Box Number is Not Acceptable) |  |   |  |   |   |   |   |
| •.*   |   |  |                         |   | City  |  |   |  | FL  | Zip Code  | )   |   |
|   | named entity<br>ions of regist                          | y submits this statement for<br>ered agent.  | or the purp             | oose of changing its                                    | registere   | ed office o                              | registere                                   | ed agent, or both, in  | the State of Fl                                     |   | t<br>miliar with,                                 | and accept                              |
| SIGNATURE .   | Signature, typed  | or printed name of registered agent  | and title if ap         | plicable. (NOTE   | : Registere   | d Agent eignat                           | ure required                                | when reinstating)  | ***   | DATE  |   | <u>.</u>                                |
| Dı  | 9. Election Campaign Financing Trust Fund Contribution. |  |                         | \$5.00 May Be<br>Added to Fees                          |   | fake check<br>rida Departi               |   |  |   |   |   |   |
| 10.   |   | OFFICERS AND DI  | RECTORS                 | <u> </u>  | 11.   |  | Α   | DDITIONS/CHANG   | ES TO OFFICE  | RS AND DIR  | ECTORS IN   | 10                                      |
| TITLE NAME STREET ADDRESS CITY-ST-ZiP                 |   | CH, ROBERT<br>BURY BLVD<br>FL 34120  |                         | ☐ Delete  |   |  | 8250  | ERSEN, DAVID<br>DANBURY BU<br>ES, FL 34                                |   |   | ☐ Change  | <b>⊠</b> Addition                       |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                 |   | ED <sub>:</sub><br>BURY BLVD<br>FL 34120   |                         | <b>⊯</b> Delete   |   |  |   |  |   |   | ☐ Change  | ☐ Addition                              |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                 | DS<br>SMITH, LA<br>8250 DAN<br>NAPLES,                  | BURY BLVD  | -                       | ☐ Delete  |   |  | · <del></del> ·                             |  | ·-·   | _   | ☐ Change  | ☐ Addition                              |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                 | DP<br>BUSH, RO<br>8250 DAN<br>NAPLES,                   | BURY BLVD  |                         | ☐ Delete  |   |  |   |  |   |   | ☐ Change  | ☐ Addition                              |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP        |   | ERALD<br>I BURY BLVD<br>FL 34120   |                         | ☐ Delete  |   |  |   |  |   |   | ☐ Change  | ☐ Addition                              |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP                 | ·   |  |                         | ☐ Delete  |   |  |   |  |   |   | Change  | ☐ Addition                              |
| indicated<br>of the cor                               | on this report<br>poration or th                        | e information supplied wit<br>t or supplemental report i<br>ne receiver or trustee emp<br>comment with an address, | s true and<br>owered to | accurate and that me execute this report a              | ıy signat<br>as requi                                   | mption sta<br>ture shall f<br>red by Cha | ted in Sec<br>ave the s<br>apter 617        | ction 119.07(3)(i), F<br>same legal effect as<br>, Florida Statutes; a | lorida Statutes.<br>if made under<br>nd that my nan | I further certi<br>oath; that I ar<br>ne appears in | fy that the in<br>n an officer<br>Block 10 or     | formation<br>or director<br>Block 11 if |

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