2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 19, 2004 8:00 am
Secretary of State
03-19-2004 90044 027 ****61.25

DOCUMENT # N98000006958

1. Entity Name
TRAILSIDE HOMEOWNERS ASSOCIATION, INC.

54019874

Principal Place of Business	Mailing Address
8961 SE BRIDGE ROAD HOBE SOUND, FL 33455	8961 SE BRIDGE ROAD HOBE SOUND, FL 33455

02112004 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 65-0904672 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CORNETT, JANE 401 E OSCEOLA STREET STUART, FL 33495	Name Street Address (P.O. Box Number is 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.

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, 2004

9. 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/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP BROWN, DONALD 8280 SE DHARLYS STREET HOBE SOUND, FL 33455	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP PETZ, MAURICE 19793 58th ROAD, SOUTH LAKE WORTH, FL 33467	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP DUTHIE, JOHN 3430 SW ISLESWORTH CIRCLE PALM CITY, FL 34990	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DVP HAGGERTY, DAN 810 SW SALERNO ROAD STUART, FL 34997	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS PUGLISE, JOHN 15646 HAYNIE LANE JUPITER, FL 33478	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS FREEMAN, DEAN 8847 NW 44th CT. CORAL SPRINGS, FL 33065	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS WOLF, IVY 13950 184TH PLACE NORTH JUPITER, FL 33478	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HINKOFER, MARK 5714 GREENWOOD AVENUE WEST PALM BEACH, FL 33407	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT REICH, PHILLIP 7 DANFORTH DRIVE HEWITT, NJ 07421	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MURRAY, TIMOTHY 4230 SE KUBIN AVENUE STUART, FL 34996	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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: V. Pres 3/12/04 561-789-5353
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #