2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2004
Secretary of State

DOCUMENT# N99000001478

Entity Name: BOLERO AT TIBURON CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

C/O HAYDEN & ASSOCIATES
15250 S. TAMIAMI TRAIL, SUITE H
FT. MYERS, FL 33908

New Principal Place of Business:

BOLERO DRIVE
NAPLES, FL 34109

Current Mailing Address:

C/O HAYDEN & ASSOCIATES
15250 S. TAMIAMI TRAIL, SUITE H
FT. MYERS, FL 33908

New Mailing Address:

PO BOX 10519
NAPLES, FL 34101

FEI Number: 59-3564003 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GOLDMAN, ELLEN A
PORTER,WRIGHT,MORRIS & ARTHUR,LLP
5801 PELICAN BAY BLVD., SUITE 300
NAPLES, FL 34108 US

Name and Address of New Registered Agent:

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:

Title: PD ( ) Delete
Name: PRINCE, ROBERT
Address: 2650 BOLERO DR.
City-St-Zip: NAPLES, FL 34109

Title: VD ( ) Delete
Name: MCKNIGHT, ALICE
Address: 2630 BOLERO DR.
City-St-Zip: NAPLES, FL 34109

Title: STD ( ) Delete
Name: KAUFMAN, JAMES
Address: 2605 ESTRELLA COURT
City-St-Zip: NAPLES, FL 34109

Title: D ( ) Delete
Name: RICHARDS, JOHN
Address: 2626 BOLERO DR.
City-St-Zip: NAPLES, FL 34109

Title: ( ) Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: D ( ) Change (X) Addition
Name: PERRON, RALPH
Address: 2638 BOLERO DR
City-St-Zip: NAPLES, FL 34109

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: ROBERT PRINCE PD 04/27/2004
Electronic Signature of Signing Officer or Director — Date