

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 91039 035 ****61.25

DOCUMENT # N99000003914					
1. Entity Name THE VINEYARDS AT PALM BEACH HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 322 N.E. 3RD ST. BOYNTON BEACH, FL 33435			Mailing Address 322 N.E. 3RD ST. BOYNTON BEACH, FL 33435		
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 65-0919628	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LEOPOLD, NORMAN 20801 BISCAYNE BLVD SUITE 501 AVENTURA, FL 33180			7. Name and Address of New Registered Agent Name: <u>ST John Core, & Lemme, PA</u> Street Address (P.O. Box Number is Not Acceptable): <u>1601 Forum Place</u> Suite <u>701</u> City: <u>West Palm Beach</u> FL Zip Code: <u>33401</u>		
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: <u>David Sfor</u> DATE: <u>4/21/04</u> Signature, typed or printed name of registered agent and title, if applicable. (NOTE: Registered Agent signature required when reinstating)					
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 P NAME NELSON, JACK STREET ADDRESS 4049 PLUMBAGO RD. CITY-ST-ZIP LAKE WORTH, FL 33462	☒ Delete		TITLE P NAME Anthony Burke STREET ADDRESS 4110 Plumbago Place CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Change ☒ Addition	
TITLE V NAME MADDIA, CASSANDRA STREET ADDRESS 4034 ARTHURIUM AVE. CITY-ST-ZIP LAKE WORTH, FL 33462	☒ Delete		TITLE V NAME Angelo KOTZAMANIS STREET ADDRESS 6868 Sea Daisy Drive CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Change ☒ Addition	
TITLE T NAME BATLIS, NICK STREET ADDRESS 4087 ARTHURIUM AVE. CITY-ST-ZIP LAKE WORTH, FL 33462	☒ Delete		TITLE T NAME Cassandra Thaddies STREET ADDRESS 4034 ARTHURIUM AVE. CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Change ☒ Addition	
TITLE D NAME RENNE, GRACE STREET ADDRESS 4037 PLUMBAGO PL. CITY-ST-ZIP LAKE WORTH, FL 33462	☒ Delete		TITLE S NAME Frank Gentile STREET ADDRESS 4085 Plumbago Place CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Change ☒ Addition	
TITLE D NAME THADDIS, JAMES STREET ADDRESS 4034 ARTHURIUM AVE. CITY-ST-ZIP LAKE WORTH, FL 33462	☒ Delete		TITLE D NAME Brian Kendall STREET ADDRESS 4039 ARTHURIUM AVE CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Change ☒ Addition	
TITLE D NAME VENSKI, BOB STREET ADDRESS 4047 COANTICE CT. CITY-ST-ZIP LAKE WORTH, FL 33462	☐ Delete		TITLE D NAME GRACE RANCE STREET ADDRESS 4037 Plumbago Place CITY-ST-ZIP LAKE WORTH, FL 33462	☐ 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: <u>Anthony M. Burke</u> ANTHONY M. BURKE <u>4/12/04</u> <u>561-386-7256</u> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					