

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000005473

FILED
Jul 05, 2004
Secretary of State

Entity Name: WITHAM AIRPORT ACTION MAJORITY, INC.

Current Principal Place of Business:

2336 SE OCEAN BLVD.
SUITE 172
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

2336 SE OCEAN BLVD.
SUITE 172
STUART, FL 34996

New Mailing Address:

FEI Number: 65-1000997

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BRODIE, LAWRENCE P
525 CAMDEN AVENUE
STUART, FL 34994 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: PINE, LYNNE
Address: 1026 E. 18TH STREET
City-St-Zip: STUART, FL 34996

Title: VD (X) Delete
Name: MOIR, JIM
Address: 5215 SW WILLIAMS WAY
City-St-Zip: STUART, FL 34996

Title: STD () Delete
Name: STEARNS, GORDON
Address: 80 N. SEWALLS PT. RD.
City-St-Zip: SEWALLS POINT, FL 34996

Title: TRS () Delete
Name: MELENDEZ, GREG
Address: 521 SE EDGEWOOD DR.
City-St-Zip: STUART, FL 33496

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: SHORE, DAVE
Address: 42 EMARITA WAY
City-St-Zip: STUART, FL 34996

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

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

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

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: GREG MELENDEZ

TRS

07/05/2004

Electronic Signature of Signing Officer or Director

Date