2004 FOR PROFIT CORPORATION ANNUAL REPORT

FILED Apr 29, 2004 08:00 AM Secretary of State

ANNOAL REPORT					Carried a COA-A-
1. Entity Name 1194 COF		301			Secretary of State
Principal Place	e of Business	Mailing Address			
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1037 COUNTRY CLUB DRIVE 1037 COUNTRY CLUB DRIVE			•		
N. PALM BEA	ich, FL 33408-US	N. PALM BEACH, FL 33408-US	•		
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	- (-)		:	04222004	No Chg-P CR2E034 (10/03)
Managar Park	A LANGE VALUE OF	BUTILLO ODA	~-	04222004	110 ong (0122001 (10100)
	O NOI WHILE	IN THIS SPAT	CE	4. FEI Number	Applied For
DO NOT WRITE IN THIS SPAC				65-05034	32 Not Applicable
		••		00 0000 1	
	, , , ,			5. Certificate of	Status Desired
					ree riequised
	6. Name and Address of Current Re	gistered Agent			A 15 CONTRACTOR OF THE PROPERTY OF THE PROPERT
KINO, GREGORY S ESQ				א סמ	IOT WRITE
515 NORT	'H FLAGLER DRIVE				
SUITE 1800				INI TI	HIS SPACE
WEST PALM BEACH, FL 33401			\	11.4 [1	TIO SPACE
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			l		tanger at recorded the Management of the second section of the second section and the second
	named entity submits this statement for tions of registered agent.	he purpose of changing its register	ed office or register	red agent, or both,	in the State of Florida, I am familiar with, and accept
.					
SIGNATURE.	Signature typed or printed name of registered agent and	title it applicable (NOTE Registere	ed Agent signature required	(when reinstating)	DATE
<u> </u>					
1		9. Election Campaign Finar	ncina Ć E	00 v 0.	
FIL	E NOW!!! FEE IS \$150.00		Add Add	.00 May Be ed to Fees	
Arterm	ay 1, 2004 Fee will be \$550.00	, , , , , , , , , , , , , , , , , , , ,			
10.	OFFICERS AND D	RECTORS	T		THE RESIDENCE OF A STATE OF THE PROPERTY AND THE PROPERTY
	PD				
TITLE			1		
NAME	MURRAY, DICKRON E				lifermont ተመለቀም
STREET ADDRESS	1037 COUNTRY CLUB DRIVE		Ì		U00000138945 .04/29/04=80100-024_150.00—
CITY-ST-ZIP	N. PALM BEACH, FL 33408				.942237942804007024-150.00-
TITLE	D	·	1		
NAME	MURRAY, MARJORIE L		I		
STREET ADDRESS	1037 COUNTRY CLUB DRIVE		I		İ
CITY-ST-ZIP	N. PALM BEACH, FL 33408		1		
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TITLE	SD				
NAME	WILSON, C.R.				
STREET ADDRESS	2399 S. SHORE DR.			חח ו	IOT WOITE
CITY-ST-ZIP	PALM BEACH GARDENS, FL			<u> </u>	NOT WRITE
TITLE	D		1	181 T	LUC CDACE
1 "	_		l	IN I	HIS SPACE
NAME	WILSON, EDWARD		I		
STREET ADDRESS	5700 CORDOVA SUITE 303				
CITY-ST-ZIP	FT. LAUDERDALE, FL			•	the state of the s
TITLE			,		- · ·
NAME			1		
STREET ADDRESS	ì		1		· · ·
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L CITY-ST-7IP			1		
CITY-ST-ZIP				AND 100 100 100 100 100 100 100 100 100 10	ودور وها مستخصرين مستخ

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 607, 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:

STREET ADDRESS CITY-ST-ZIP

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/27/04 56/ 80/ PIA/ Date Dayme Prone!