

2006 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 325426

FILED
May 01, 2006
Secretary of State

Entity Name: SEMINOLE GARDENS APARTMENT NO 17-F, INC.

Current Principal Place of Business:

8330 112TH ST. N.
SEMINOLE, FL 33772 US

New Principal Place of Business:

Current Mailing Address:

8330 112TH ST. N.
SEMINOLE, FL 33772 US

New Mailing Address:

FEI Number: 59-1235140 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CASTLES, LORENA P
8330 112TH ST N
SEMINOLE, FL 33772 US

Name and Address of New Registered Agent:

PEACOCK, TOMMAY T PRES
8330 112TH ST N
SEMINOLE, FL 33772 US

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: TOMMAY T PEACOCK 05/01/2006

Electronic Signature of Registered Agent Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.
Election Campaign Financing Trust Fund Contribution ()

OFFICERS AND DIRECTORS:

Title: V () Delete
Name: ROCKETT, NORAH
Address: 8330 112 ST N
City-St-Zip: SEMINOLE, FL 33772

Title: T () Delete
Name: GEESEY, ELEANOR
Address: 8330 112 ST N
City-St-Zip: SEMINOLE, FL 33772

Title: V () Delete
Name: HORN, STEPHEN
Address: 8330 112 ST N
City-St-Zip: SEMINOLE, FL

Title: P () Delete
Name: REESE, DOROTHY
Address: 8330 112 ST N
City-St-Zip: SEMINOLE, FL 00000,

Title: S () Delete
Name: BRAUNSTEIN, CYNTHIA
Address: 8330 112TH ST. N
City-St-Zip: SEMINOLE, FL 33772

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: () 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 Chapter 119, 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 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: TOMMAY T PEACOCK PRES 05/01/2006

Electronic Signature of Signing Officer or Director Date