


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

05-02-2005 90981 009 ****61.25

DOCUMENT # 706568
 1. Entity Name
 TWIN OAK POND ASSOCIATION INC



Principal Place of Business
 5208 WINDING WAY
 SARASOTA, FL 34242 US

Mailing Address
 5208 WINDING WAY
 SARASOTA, FL 34242 US

40076755



2. Principal Place of Business
 5235 WINDING WAY
 Suite, Apt. #, etc.

3. Mailing Address
 5235 WINDING WAY
 Suite, Apt. #, etc.

04122005 Chg-NP CR2E037 (10/03)

City & State
 SARASOTA FL

City & State
 SARASOTA FL

Zip
 34242 Country

Zip
 34242 Country

4. FEI Number
 05-0062205

Applied For
 Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent
 GLASER, STEPHANIE
 5208 WINDING WAY
 SARASOTA, FL 34242

7. Name and Address of New Registered Agent
 Name BRYAN GORDON
 Street Address (P.O. Box Number is Not Acceptable)
 5235 WINDING WAY
 City SARASOTA FL Zip Code 34242

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 Bryan Gordon DATE 4-24-05
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, 2005

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

| | | |
|----------------|--------------------------------------|--|
| TITLE | VD | <input checked="" type="checkbox"/> Delete |
| NAME | TANNER, MERRILL | |
| STREET ADDRESS | 5221 WINDING HWY | |
| CITY-ST-ZIP | SARASOTA, FL 34242 | |
| TITLE | D | <input type="checkbox"/> Delete |
| NAME | BOYD, CANDACE | |
| STREET ADDRESS | 5240 WINDING WAY | |
| CITY-ST-ZIP | SARASOTA, FL 34242 | |
| TITLE | TD | <input checked="" type="checkbox"/> Delete |
| NAME | GLASER, STEPHANIE D | |
| STREET ADDRESS | 5208 WINDING WAY | |
| CITY-ST-ZIP | SARASOTA, FL 34242 | |
| TITLE | VP | <input type="checkbox"/> Delete |
| NAME | BRYAN WITCHER JACK McCANN | |
| STREET ADDRESS | 5244 WINDING WAY | |
| CITY-ST-ZIP | SARASOTA, FL | |
| TITLE | P | <input type="checkbox"/> Delete |
| NAME | GORDON, BRYAN | |
| STREET ADDRESS | 5239 WINDING WAY | |
| CITY-ST-ZIP | SARASOTA, FL 34242 | |
| TITLE | S | <input type="checkbox"/> Delete |
| NAME | PHYLLIS TOWN | |
| STREET ADDRESS | 5244 WINDING WAY | |
| CITY-ST-ZIP | SARASOTA FL 34242 | |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | | |
|----------------|-------------------|--|
| TITLE | T | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | SAUDY GRECO | |
| STREET ADDRESS | 5232 WINDING WAY | |
| CITY-ST-ZIP | SARASOTA FL 34242 | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |
| TITLE | | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | |
| STREET ADDRESS | | |
| CITY-ST-ZIP | | |

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: Bryan Gordon DATE 4-24-05 DAYTIME PHONE # 9419521086
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR