

# 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 747257

FILED  
Apr 03, 2004  
Secretary of State

Entity Name: CIMARRON HOMEOWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

1107 CIMARRON CIRCLE, NW  
BRADENTON, FL 34209 US

**New Principal Place of Business:**

**Current Mailing Address:**

1107 CIMARRON CIRCLE, NW  
BRADENTON, FL 34209 US

**New Mailing Address:**

FEI Number: 59-2024852

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SPARRGROVE, WILLIAM  
1107 CIMARRON CIRCLE, NW  
BRADENTON, FL 34209

**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: DP ( ) Delete  
Name: DYE, STEVE  
Address: 1007 CIMARRON CIR W  
City-St-Zip: BRADENTON, FL 34209

Title: VD ( ) Delete  
Name: WEAVER, DARRYL  
Address: 1115 CIMARRON CIRCLE, NW  
City-St-Zip: BRADENTON, FL 34209

Title: DS ( ) Delete  
Name: WILLIS, DALE  
Address: 1116 CIMARRON CIRCLE, NW  
City-St-Zip: BRADENTON, FL 34209

Title: TD ( ) Delete  
Name: CHALTIS, WILLIAM  
Address: 1107 CIMARRON CIRCLE, NW  
City-St-Zip: BRADENTON, FL 34209

Title: D ( ) Delete  
Name: PATTISON, HERBERT  
Address: 1111 CIMARRON CIRCLE, NW  
City-St-Zip: BRADENTON, FL 34209

**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 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: WILLIAM S CHALTIS

TD

04/03/2004

Electronic Signature of Signing Officer or Director

Date