2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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SIGNATURE:

Feb 28, 2005 8:00 am **DOCUMENT # 758369 Secretary of State** 1. Entity Name 02-28-2005 90211 004 ****70.00 ARBOR TRAILS HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 17 GLEN ARBOR PARK ORMOND BEACH FL 32174 17 GLEN ARBOR PARK ORMOND BEACH FL 32174 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State Applied For City & State 4. FEI Number 59-2140685 Not Applicable Ζiρ Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Kerala CLIFTON, RONALD D JR Street Address (P.O. Box Number is Not Acceptable) 2335-A SOUTH RIDGEWOOD AVE DAYTONA BEACH FL 32119 Pidecer 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 (NOTE, Registered Agent signature required when reinstating) DATE percipe continue FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Due By May 1, 2005 Trust Fund Contribution. Florida Department of State Added to Fees OFFICERS AND DIRECTORS TO OFFICERS AND DIRECTORS IN 10 ADDITIONS/CHANGES 10. 11. TITLE ☐ Delete TITLE Change Addition MCCORMICK, DORIS NAME NAME 16 LAKEWOOD PARK STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 CITY-ST-ZIP CITY-ST-ZIP TIT1 F Delete TITLE **Change** Addition Dragone, Daniel DRAGO**R**E, DANIEL NAME NAME 11 LAKEWOOD PARK 11 Lakewood Park STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 CITY-ST-7IP CITY-ST-ZIP 32174 -TITLE Delete TITLE Addition PUCKETT, STEPHEN NAME NAME 15 GLEN ARBOR PARK DRIVE STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32174 CITY-ST-ZIP CITY-ST-ZIP MG-12 TITLE ☐ Delete TITLE ☐ Addition CLIFTON, RONALD D JR Clotter, Rosald D. Jr NAME NAME 1326 S. Ridgewood Sie #14 2335-1 SOUTH RIDGEWOOD AVE STREET ADDRESS STREET ADDRESS DAYTONA BEACH FL 32119 CITY-ST-ZIP CHTY-ST-ZIP X Delete TITLE TULE Change ☐ Addition HUNT, PAMELA NAME NAME 120 RIVER LN STREET ADDRESS STREET ADDRESS ORMOND BEACH FL 32176 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE Change **Addition** wendy Hart 4LAKewood Park ormord Beach NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP ŦL 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 eport 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 of trusted 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.

SIGNING OFFICER OR DIRECTOR

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Daytime Phone #