

2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 04, 2005 8:00 am
Secretary of State

04-04-2005 90087 037 ***150.00

DOCUMENT # G92679 1. Entity Name ARIANA SHORES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 116A PARADISE LANE AUBURNDAL, FL 33823 US			Mailing Address 116A PARADISE LANE AUBURNDAL, FL 33823 US		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		50033264 	
City & State Zip Country		City & State Zip Country		03162005 Chg-P CR2E034 (10/03)	
4. FEI Number 59-2387985				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required					
6. Name and Address of Current Registered Agent HORN, ERNEST W 166 HOLIDAY LANE AUBURNDAL, FL 33823			7. Name and Address of New Registered Agent Name BENDER, MARY E Street Address (P.O. Box Number is Not Acceptable) 132 Holiday Lane City Auburndale FL Zip Code 33823		
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 <i>Mary E. Bender</i> MARY E. Bender, President 031905 (Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE)					
FILE NOW!!! FEE IS \$150.00 After May 1, 2005 Fee will be \$550.00		9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. ☐ Added to Fees			
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11		
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D ROBERTS, GLEN 154 HOLIDAY LANE AUBURNDAL, FL 33823	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	S BAUSHKE SANDRA 133 PARADISE LANE Auburndale, FL 33823	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	P HORN, ERNEST W 166 HOLIDAY LANE AUBURNDAL, FL 33823	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	D HORN ERNEST W 166 HOLIDAY LANE Auburndale, FL 33823	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	D KESTER, BETTY 152 HOLIDAY LANE AUBURNDAL, FL 33823	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	D COCHRAN, DAVID 160 HOLIDAY LANE Auburndale, FL 33823	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	T MCCOY, FRED 156 HOLIDAY LANE AUBURNDAL, FL 33823	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	HOPKINS JOHN 114 PARADISE LANE Auburndale, FL 33823	☒ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	VP JONES, BOB 144 HOLIDAY LANE AUBURNDAL, FL 33823	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	D JAMES, JIM 164 HOLIDAY LANE Auburndale, FL 33823	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST- ZIP	S BENDER, MARY 133 HOLIDAY LN AUBURNDAL, FL	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST- ZIP	P Bender MARY E 132 Holiday Lane Auburndale, FL 33823	☒ Change ☐ Addition
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: <i>Mary E. Bender</i> MARY E. BENDER, President 031905 (Signature and typed or printed name of signing officer or director) Date Daytime Phone #					