2004 NOT-FOR-PROFIT CORPORATION

changed, or on an attachment with

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SIGNATURE:

May 03, 2004 8:00 am Secretary of State **ANNUAL REPORT** DOCUMENT # N01000003796 05-03-2004 90777 018 ****61.25 ABERDEEN HOMEOWNERS ASSOCIATION OF PASCO, TAMPA, FL 33606 St. Petersburg. TL 33 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 04282004 Chq-NP CR2E037 (10/03) Applied For City & State 4. FEI Number 59-3758162 City & State Not Applicable Zip 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 Name RONALD OTTERILLI RONALD JAMES, JUDITH L Street Address 325-SOUTH BLVD Z6 ZS TAMPA, FL 33606 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 age SIGNATURE Signature, typed of (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Make check payable to \$5.00 May Be Filing Fee is \$61.25 Florida Department of State Trust Fund Contribution. Due by May 1, 2004 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11, 10. ANGIE CARK 5144 TREIG CANE TITLE D7 Delete Change ☐ Addition TITLE HAYDON, ROGERS K JR NAME NAME 15500 ROOSEVELT BVLD. #303 STREET ADDRESS ZEPHYRhills, 71. 33544 STREET ADDRESS CITY-ST-7IP CLEARWATER, FL 33760 CITY-ST-7/P CASCADE DUSEL TITLE DS Delete ☐ Change Addition TITLE 31803 lock Aline Dr. RUBIN, LESLIE A NAME 15500 ROOSEVELT BLVD. #303 STREET ADDRESS STREET ADDRESS ZEPHYRhills, 71. 33544 CLEARWATER, FL 33760 CITY-ST-ZIP CITY-ST-ZIP IIILE P SEAROLD Hill Change ■ Addition THE JAMES, JUDITH L NAME NAME 5533 TREIG LANE STREET ADDRESS 325 SOUTH BLVD STREET ADDRESS TAMPA, FL 33606 CITY-ST-ZIP ZEPHYRhills, 71. 33544 CITY-ST-ZIP Delete TITLE VP HOLLIF TOPASH ☐ Change ■ Addition TITLE NAME NAME 5467 TREIG CANE STREET ADDRESS STREET ADDRESS ZRPHYRPIIIS, 71. 33544 DAUID CARR CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE NAME NAME STREET ADDRESS STREET ADDRESS ZEPHYRhills, 71. 3354 CITY-ST-ZIP CITY-ST-ZIP Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-7IP 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 acquirate 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 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 tike employeers.

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