

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000000345

FILED
Mar 03, 2005
Secretary of State

Entity Name: DEBARY PLANTATION UNIT 21B HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5695 BEGGS RD
B-100
ORLANDO, FL 32610

New Principal Place of Business:

PO BOX 290628
PORT ORANGE, FL 32129

Current Mailing Address:

5695 BEGGS RD
B-100
ORLANDO, FL 32610

New Mailing Address:

PO BOX 290628
PORT ORANGE, FL 32129

FEI Number: 58-2669774

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

SUTHERLAND, THERESA
5695 BEGGS RD
B-100
ORLANDO, FL 32610 US

Name and Address of New Registered Agent:

FRYE, KAREN M
PO BOX 290628
PORT ORANGE, FL 32129 US

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: KAREN M FRYE

03/03/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: VERNON, WILLIAM G
Address: 100 DEBARY PLANTATION BLVD
City-St-Zip: DEBARY, FL 32713

Title: VD () Delete
Name: PREMIER, ROY
Address: 100 DEBARY PLANTATION BLVD
City-St-Zip: DEBARY, FL 32713

Title: STD () Delete
Name: MOODY, RICHARD
Address: 100 DEBARY PLANTATION BLVD
City-St-Zip: DEBARY, FL 32713

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: GERKEN, BRETT D
Address: PO BOX 291293
City-St-Zip: PORT ORANGE, FL 32129

Title: VD (X) Change () Addition
Name: CARBONE, JOHN
Address: 1971 COUNTRY CLUB DRIVE
City-St-Zip: PORT ORANGE, FL 32124

Title: STD (X) Change () Addition
Name: FRYE, KAREN M
Address: PO BOX 290628
City-St-Zip: PORT ORANGE, FL 32129

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: KAREN M FRYE

STD

03/03/2005

Electronic Signature of Signing Officer or Director

Date