

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N02000007104

FILED
Mar 04, 2005
Secretary of State

Entity Name: ARBOR THICKET HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1300 THICKET LANE
SARASOTA, FL 34240

New Principal Place of Business:

Current Mailing Address:

1300 THICKET LANE
SARASOTA, FL 34240

New Mailing Address:

FEI Number: 81-0573016

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOPE, EDWIN G
7355 RICHARDSON RD.
SARASOTA, FL 34240 US

Name and Address of New Registered Agent:

TOPE, EDWIN G
1300 THICKET LANE
SARASOTA, FL 34240 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:

03/04/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: TOPE, EDWIN G
Address: 1300 THICKET LANE
City-St-Zip: SARASOTA, FL 34240

Title: T () Delete
Name: TOPE, RENEE
Address: 1300 THICKET LANE
City-St-Zip: SARASOTA, FL 34240

Title: T () Delete
Name: BARRETT, JEFFERY
Address: 1110 NOGALES BEND
City-St-Zip: RICHMOND, TX 77469

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:

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: TOPE EDWIN G

D

03/04/2005

Electronic Signature of Signing Officer or Director

Date