


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 28, 2004 8:00 am
Secretary of State

05-28-2004 90003 038 ****61.25

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DOCUMENT # N0300000538			
1. Entity Name LITTLE CREEK HOMEOWNERS' ASSOCIATION OF OSCEOLA COUNTY, INC.			
Principal Place of Business 650 S. CENTRAL AVENUE SUITE 1000 OVIEDO, FL 32765		Mailing Address 650 S. CENTRAL AVENUE SUITE 1000 OVIEDO, FL 32765	
2. Principal Place of Business		3. Mailing Address <i>1033 E. Vinc St.</i>	
Suite, Apt. #, etc.		Suite, Apt. #, etc. <i>Suite 110</i>	
City & State		City & State <i>Kissimmee FL</i>	
Zip	Country	Zip <i>34744</i>	Country <i>USA</i>
4. FEI Number		05032004 Chg-NP CR2E037 (10/03)	
		<input checked="" type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired		<input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
CLARK, SCOTT D 655 W. MORSE BOULEVARD SUITE 212 WINTER PARK, FL 32789		Name	
		Street Address (P.O. Box Number is Not Acceptable)	
		City	
		FL Zip Code	
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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>			
Filing Fee is \$61.25 Due by September 8, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	PD WHITE, KENNETH L 650 S. CENTRAL AVENUE #1000 OVIEDO, FL 32765 <input checked="" type="checkbox"/> Delete	TITLE	PD Dan Green 8403 South Park Circle, Suite 670 Orlando, Florida 32819 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	VD RIGSBY, WILLIAM D 650 S. CENTRAL AVENUE #1000 OVIEDO, FL 32765 <input checked="" type="checkbox"/> Delete	TITLE	VTD Mark Falck 8403 South Park Circle, Suite 670 Orlando, Florida 32819 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	D CLARK, SCOTT D 650 S. CENTRAL AVENUE #1000 OVIEDO, FL 32765 <input checked="" type="checkbox"/> Delete	TITLE	SC Matt Call 8403 South Park Circle, Suite 670 Orlando, Florida 32819 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE	<input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 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.			
SIGNATURE: <i>Matt Call</i> Matt Call - Secretary		5125104 321-354-2565	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date Daytime Phone #</small>	