


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 14, 2007 8:00 am
Secretary of State

05-14-2007 90086 022 ****61.25

DOCUMENT # N05000000139

1. Entity Name
SEVEN OAKS AT SUNDANCE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 188 SEVEN OAKS DRIVE MULBERRY, FL 33860	Mailing Address 188 SEVEN OAKS DRIVE MULBERRY, FL 33860
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DO NOT WRITE IN THIS SPACE

40112529



02022007 No Chg-NP CR2E037 (4/06)

4. FEI Number 20-2773267	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

**STILLINGER, YANCEY
 188 SEVEN OAKS DRIVE
 MULBERRY, FL 33860**

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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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by May 1, 2007**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP STILLINGER, YANCEY 188 SEVEN OAKS DRIVE MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY - ST - ZIP	OV WEICHT, JASON 244 SEVEN OAKS DRIVE MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT TAYLOR, JON 184 SEVEN OAKS DRIVE MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS GEBHARDT, JOAN 217 SEVEN OAKS DRIVE MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DU PETROFF, WALTER 136 SEVEN OAKS DR MULBERRY, FL 33860
TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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:  **YANCY Stillinger** **4/29/07** **(863) 888-9222**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #