

**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Feb 22, 2007 08:00 AM**  
**Secretary of State**

**DOCUMENT # N20718**  
 1. Entity Name  
**LOT 15, BLOCK 278, UNIT 13 HOMEOWNERS' ASSOCIATION, INC.**



Principal Place of Business      Mailing Address  
**5509 GRANADA BLVD      5509 GRANADA BLVD**  
**SEBRING, FL 33872-1550      SEBRING, FL 33872-1550**



01262007 No Chg-NP      CR2E037 (4/06)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number      Applied For  
**59-2874675**      Not Applicable

5. Certificate of Status Desired            **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**BIRECKI, CELINA**  
**5509 GRANADA BLVD**  
**SEBRING, FL 33872-1550**

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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

U00000644428  
 03/02/07-80041-023 61.25

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHEARER, DAS 5507 GRANADA BLVD. SEBRING, FL 338721550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PDS SHEARER, GRACE 5507 GRANADA BLVD. SEBRING, FL 338721550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BIRECKI, CELINA 5509 GRANADA BLVD SEBRING, FL 338721550
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
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: Celina Birecki      2/20/07      Date      Daytime Phone #