


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED

**Apr 01, 2005 08:00 AM
Secretary of State**

DOCUMENT # N37124
 1. Entity Name
GINGER MILL HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address
 P.O. BOX 770481 P.O. BOX 770481
 ORLANDO, FL 32877-0481 US ORLANDO, FL 32877-0481 US

DO NOT WRITE IN THIS SPACE



03112005 No Chg-NP CR2E037 (10/03)

4. FEI Number **59-2995770** Applied For
 Not Applicable
 5. Certificate of Status Desired **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent
GOLDHAMMER, WAYNE
 2182 DILL DRIVE
 ORLANDO, FL 32837

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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: Wayne Goldhammer - President [Signature] 3/10/2005
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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	PD GOLDHAMMER, WAYNE 2182 DILL DRIVE ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D STEPHAN, SCOTT 12470 CORIANDER DR ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD CORA, ELAINE 12487 CORIANDER DR ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T BRANNOCK, PATTY 12368 CORIANDER DR ORLANDO, FL 32837
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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U00000224306
04/01/05-80064-013 70.00

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Wayne Goldhammer - President [Signature] 3/10/2005 407-489-9707
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #