2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2004
Secretary of State

DOCUMENT# N38361

Entity Name: HOMETOWN PHASE II HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W SR 434,
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044

Current Mailing Address:

2180 W SR 434,
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

2180 W SR 434
SUITE 5000
LONGWOOD, FL 327795044

FEI Number: 59-3049582 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

HART, JAMES W., JR.
SENTRY MANAGEMENT INC.
2180 W. SR 434, SUITE 5000
LONGWOOD, FL 32779

Name and Address of New Registered Agent:

HART, JAMES W JR
2180 WEST SR 434
SUITE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR 03/29/2004
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: ERICHSEN, MILLIE
Address: 9973 ALOMA BEND LN
City-St-Zip: OVIEDO, FL 32765

Title: STD ( ) Delete
Name: HOLLOWAY, RICHARD
Address: 9977 ALOMA BEND LN
City-St-Zip: OVIEDO, FL 32765

Title: VD ( ) Delete
Name: STONER, DONALD
Address: 9989 ALOMA BEND LN
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: STD (X) Change ( ) Addition
Name: DURHAM, STACY
Address: 9970 ALOMA BEND LN
City-St-Zip: OVIEDO, FL 32765

Title: VPD (X) Change ( ) Addition
Name: STONER, DONALD
Address: 9989 ALOMA BEND LN
City-St-Zip: OVIEDO, FL 32765

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: MILLIE ERICHSEN PD 03/29/2004
Electronic Signature of Signing Officer or Director Date