

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

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

03-14-2007 90045 041 ****61.25

DOCUMENT # N44379	
1. Entity Name VARTY ROAD HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 5000 VARTY RD WINTER HAVEN FL 33884	Mailing Address 5000 VARTY RD WINTER HAVEN FL 33884
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2. Principal Place of Business - No P.O. Box #		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

1st MOORE CR2E037 (10/06)

4. FEI Number 59-3093549		Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent BUTZ, HELEN JEAN 5000 VARTY RD WINTER HAVEN FL 33884		7. Name and Address of New Registered Agent	
		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD ROGERS, HERB 5086 VARTY ROAD WINTER HAVEN FL 33884	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	PO Bybee, Carol 5066 Varty Road Winter Haven, FL 33884	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD BUTZ, HELEN 5000 VARTY ROAD WINTER HAVEN FL	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD BRABINER, TONY 5050 VARTY ROAD WINTER HAVEN FL 33884	☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD Wendy Burnett 5065 Varty Road Winter Haven, FL 33884	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VPD BURNETT, JAY 5065 VARTY ROAD WINTER HAVEN FL 33884	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Wendy Burnett Wendy Burnett 3/6/07 863/412-9250
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #