2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 03, 2006 8:00 am Secretary of State

04-03-2006 90368 003 ****61.25

Date

Daytime Phone #

DOCUMENT # N93000003634

1. Entity Name THATCHER'S LANDING CONDOMINIUM NO. 5 ASSOCIATION, INC.



Principal Place of Business WORLD OF HOMES

Mailing Address WORLD OF HOMES

THE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DI

KISSIMMEE,	FL 34744 US	KISSIMMEE, FL 34744	US			KJUM Ca lm Ca lm Ca lm Ca	H fitter arkin dikan akka ak	LITAT AT ITAL	
2. Principal Place of Business 1 0 m (\$ Word D of			= Hon	Homes					
28845. OSCENA A RESuite Soil BEE S. OSCROLA A 193202006 Chg-NP CR2E037 (11/05)									
City & Spat	ando Fl	1 Ozmando	o FI	·	4. FEI Number 59-331910	9		oplied For ot Applicable	
32806 - 9118 A 32806			Country	1-	5. Certificate of Sta	atus Desired	S8.75 Add Fee Require		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent Name					
DIAZ, VICI									
2884 S. O. ORLANDO	Street	Street Address (P.O. Box Number is Not Acceptable)							
	City				FL Zip Cod	e 			
8. The above named entity patronis this statement of 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.									
13-21-N									
SIGNATURE Signature, piped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE									
Filing Fee is \$61.25 9. Election Campai Due by May 1, 2006 Trust Fund Cont					\$5.00 May Be Added to Fees		check payable t Department of S		
10.	OFFICERS AND DIF		11.		ADDITIONS/CHANGE	S TO OFFICERS			
TITLE NAME	VD KATHLEEN, JOY	Delete	TITLE NAME				☐ Change	☐ Addition	
STREET ADDRESS	989 TILLERY WAY		STREET ADDRESS	•					
CITY-ST-ZIP	ORLANDO, FL		CITY-ST-ZIP						
TITLE	STD _ DURNING, JAMES	☐ Delete	TITLE NAME				☐ Change	☐ Addition	
STREET ADDRESS	987 TILLERY WAY		STREET ADORESS	1					
CITY-ST-ZIP	ORLANDO, FL 32837		CITY-ST-ZIP						
TITLE	VD	☐ Delete	TITLE				☐ Change	Addition	
NAME STREET ADDRESS	HUGGINS, MARY 959 TILLERY WAY		name Street adoress						
CITY-ST-ZIP	ORLANDO, FL 32828		CITY-ST-ZIP						
TITLE		☐ Delete	TITLE	Direc	tor,		☐ Change	Addition	
NAME			NAME STREET ADDRESS	Run	nta Vernon	l.			
STREET ADDRESS CITY-ST-ZIP			CITY-ST-ZIP	295	Tillery ways	ചു			
TITLE		☐ Delete	TITLE	127122	na a par		☐ Change	☐ Addition	
NAME			NAME						
STREET ADDRESS CITY-ST-ZIP			STREET ADORESS CITY-ST-ZIP						
TITLE	<u> </u>	□ Delete	TITLE				☐ Change	Addition	
NAME			NAME						
STREET ADDRESS			STREET ADDRESS CITY-ST-ZIP						
CITY-ST-ZIP	certify that the information supplied with	this filing does not qualify for t		ontained	I in Chapter 119. Flor	ida Statutes. I furt	her certify that the in	nformation	
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 usate 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.									
changed, or on an attachment with an address, with all other like empowered.									
SIGNATURE:									