

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000004711

**FILED
Apr 28, 2004
Secretary of State**

Entity Name: EMERALD ACRES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

431 WAVERLY ROAD
TALLAHASSEE, FL 32312 US

New Principal Place of Business:

Current Mailing Address:

431 WAVERLY ROAD
TALLAHASSEE, FL 32312 US

New Mailing Address:

FEI Number: 59-3553912 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ISAACS, DAN L
431 WAVERLY ROAD
TALLAHASSEE, FL 32312 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: WILLIAMS, BEVERLY
Address: 2523 OPAL COURT
City-St-Zip: TALLAHASSEE, FL 32308

Title: DVP () Delete
Name: HODGES, GLENN
Address: 2515 OPAL DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

Title: DST () Delete
Name: BROWN, ROGER
Address: 8748 OPAL DRIVE
City-St-Zip: TALLAHASSEE, FL 32308

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WILLIAMS, KEN
Address: 2523 OPAL COURT
City-St-Zip: TALLAHASSEE, FL 32309

Title: DVP (X) Change () Addition
Name: HODGES, GLENN
Address: 2515 OPAL DRIVE
City-St-Zip: TALLAHASSEE, FL 32309

Title: D (X) Change () Addition
Name: JOHNSON, KATHERINE
Address: 2826 SAPPHERE COURT
City-St-Zip: TALLAHASSEE, FL 32309

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: KEN WILLIAMS

D

04/28/2004

Electronic Signature of Signing Officer or Director

Date