

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
May 02, 2005 08:00 AM
Secretary of State

DOCUMENT # N97000005367	
1. Entity Name ROSEDALE 11 HOMEOWNERS' ASSOCIATION, INC.	

Principal Place of Business 5100 87TH ST E BRADENTON, FL 34202 US	Mailing Address 5100 87TH ST E BRADENTON, FL 34202 US
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04292005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number 65-0865043	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent HOGAN, PATRICK 5100 87TH ST E BRADENTON, FL 34202
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**DO NOT WRITE
IN THIS SPACE**

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 _____
Signature, typed or printed name of registered agent and title if applicable

**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	D EMIGH, GARY 5100 87TH STREET EAST BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HOGAN, PATRICK 5100 87TH STREET EAST BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D JORDAN, CURTIS 5100 87TH ST E BRADENTON, FL 34202
TITLE NAME STREET ADDRESS CITY - ST - ZIP	
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TITLE NAME STREET ADDRESS CITY - ST - ZIP	

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05/03/05-80143-003 61.25

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IN THIS SPACE**

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: Gary Emigh 4/29/05 (941) 758-2424
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #