

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N93000001243

FILED
Apr 21, 2004
Secretary of State**Entity Name:** SOUTHCHASE PARCEL 5 COMMUNITY ASSOCIATION, INC.**Current Principal Place of Business:**% SENTRY MANAGEMENT INC.
2180 WEST SR 434, STE. 5000
LONGWOOD, FL 327795044**New Principal Place of Business:****Current Mailing Address:**% SENTRY MANAGEMENT INC.
2180 WEST SR 434, STE. 5000
LONGWOOD, FL 327795044**New Mailing Address:****FEI Number:** 59-3180917**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 WEST SR 434, STE. 5000
LONGWOOD, FL 327795044**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: PD () Delete
Name: KING, ARNOLD
Address: 12467 BEACONTREE WAY
City-St-Zip: ORLANDO, FL 32837Title: TD () Delete
Name: BOHANAN, SEAN
Address: 1801 SNARES BROOK WAY
City-St-Zip: ORLANDO, FL 32837Title: D () Delete
Name: YOUNG-BOHANAN, DEBRA
Address: 1801 SNARES BROOK WAY
City-St-Zip: ORLANDO, FL 32837Title: D () Delete
Name: CUMBO, STEVEN J
Address: 1837 TATTENHAM WAY
City-St-Zip: ORLANDO, FL 32837Title: SD () Delete
Name: DICKSON, DONALD
Address: 12561 BEACONTREE WAY
City-St-Zip: ORLANDO, FL 32827**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: () Change () Addition
Name:
Address:
City-St-Zip:Title: VPD (X) Change () Addition
Name: CUMBO, STEVEN J
Address: 1837 TATTENHAM WAY
City-St-Zip: ORLANDO, FL 32837Title: () Change () Addition
Name:
Address:
City-St-Zip:

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: ARNOLD KING

PD

04/21/2004

Electronic Signature of Signing Officer or Director

Date