2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004798

FILED Apr 25, 2005 Secretary of State

Entity Name: FIELDSTREAM HOMEOWNERS ASSOCIATION, INC.

| | Principal Place of Business: | New Principal Place of Business: |
|---|---|---|
| | SON AVE. PARK, FL 32789 | |
| Current Mailing Address: | | New Mailing Address: |
| | SON AVE. PARK, FL 32789 | |
| El Number | r: 59-3470140 FEI Number Applied For () | FEI Number Not Applicable () Certificate of Status Desired () |
| lame and | d Address of Current Registered Agent: | Name and Address of New Registered Agent: |
| | ARC P SON AVE. PARK, FL 32789 US | |
| | e named entity submits this statement for the p e of Florida. | ourpose of changing its registered office or registered agent, or bo |
| SIGNATU | RE: | |
| | Electronic Signature of Registered Age | ent Date |
| FFICER | S AND DIRECTORS: | ADDITIONS/CHANGES TO OFFICERS AND DIRECT |
| Title: Name: Nddress: Dity-St-Zip: | TD () Delete CAMILLERI, RONNI 619 FIELDSTREAM BLVD. ORLANDO, FL 32825 | Title: TD (X) Change () Addition Name: CAMILLERI, RONNIE Address: 619 FIELDSTREAM BLVD. City-St-Zip: ORLANDO, FL 32825 |
| itle: lame: ddress: :ity-St-Zip: | PD () Delete FORTNA, DAVID 10526 BRUUN PLACE ORLANDO, FL 32825 | Title: () Change () Addition Name: Address: City-St-Zip: |
| itle: | SD () Delete LORENZO, CARLOS | Title: () Change () Addition Name: |
| itle: lame: ddress: :ity-St-Zip: | 10513 BRUUN PLACE ORLANDO, FL 32825 | Address: City-St-Zip: |
| ame: ddress: | | |
| ame: ddress: ity-St-Zip: tle: ame: ddress: | ORLANDO, FL 32825 VD () Delete KAPF, GEORGE 10533 ANGLER COURT | City-St-Zip: Title: VD (X) Change () Addition Name: KRAPF, GEORGE Address: 10533 ANGLER COURT |

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: DAVID FORTNA PD 04/25/2005