

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N21631

FILED  
Jul 12, 2006  
Secretary of State

**Entity Name:** SEVER'S LANDING HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

P O BOX 571  
PALM HARBOR, FL 34683 US

**New Principal Place of Business:**

P O BOX 571  
PALM HARBOR, FL 34682 US

**Current Mailing Address:**

P O BOX 571  
PALM HARBOR, FL 34682 US

**New Mailing Address:**

**FEI Number:** 59-2836105 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

MAGUIRE, SUSAN  
2027 SWAN LANE  
PALM HARBOR, FL 34683 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: D ( ) Delete  
Name: HAZLETT, JAMES  
Address: 676 SEVERS LANDING  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: KIRCHER, SHARON  
Address: 602 SEVERS LANDING  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: STEIN, GARY  
Address: 1980 SWAN LANE  
City-St-Zip: PALM HARBOR, FL 34683

Title: D ( ) Delete  
Name: GUILLETTE, MELODY  
Address: 626 SEVERS LANDING  
City-St-Zip: PALM HARBOR, FL 34683

Title: SD ( ) Delete  
Name: MERGER, RITA  
Address: 2095 SWAN LANE  
City-St-Zip: PALM HARBOR, FL

**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: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: SD (X) Change ( ) Addition  
Name: MERGER, RITA  
Address: 2095 SWAN LANE  
City-St-Zip: PALM HARBOR, FL 34683

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: GARY F. STEIN

MR

07/12/2006

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date