2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Jul 06, 2004 8:00 am Secretary of State

DOCUMENT # 703187 1. Entity Name ENGLISH ESTATES ENGLISH WOODS HOMEOWNERS ASSOC.,INC.							07-06-200)4 90114	017 ***	*61.25
212 DOVERWOOD RD P O FERN PARK, FL 32730 US P O FER			Mailing Address P 0 BOX 300129 P 0 BOX 300129 FERN PARK, FL 32730	P O BOX 300129						
		3. Mailing Address								
Suite, Apt. #, etc.		Suite, Apt. #, etc.			07012004	Chg-NP	CR2E03	7 (10/03)		
City & State		City & State			4. FEI Numbe 59-2520	063		 	optied For ot Applicable	
Zip		Country	Zip	Cou	intry	5. Certificate	of Status Desired		8.75 Add ee Require	
	6. Name	and Address of Current	Registered Agent	<u></u> , ,	<u> </u>	7. Name and	Address of New R	legistered A	gent .	
BAILES, VANESSA 212 DOVERWOOD RD FERN PARK, FL 32730					Name Street Address (P.O. Box Number is Not Acceptable)					
					City	FL Zip Code				
8. The above the obligat	e named entitions of regis	ty submits this statement fo stered agent, 	r the purpose of changing its	registere	ed office or registe	ered agent, or both	n, in the State of Flo	orida. I am f	amiliar with,	and accept
200 448	Signature, typed	d or printed name of registered agent	and title if applicable. (NOTI	E: Registered	d Agent signature require	d when reinstating)		DATE		
D	Filing Fe	d or printed name of registered eigent see is \$61.25 ptember 8, 2004	and title if applicable. (NOTI 9. Election Car Trust Fund (npaign Fi	inancing	\$5.00 May Be Added to Fees	, ,	DATE lake check ida Depart		
10.	Filing Fe	ee is \$61.25	9. Election Car Trust Fund C	npaign Fi	inancing	\$5.00 May Bo Added to Fees	, ,	lake check ida Depart	ment of S	tate
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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

Janes State

Treasurer

407-331-484

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