

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 13, 2006 8:00 am
Secretary of State

03-13-2006 90063 019 ****61.25

DOCUMENT # 743790 1. Entity Name RAVENWOOD OWNERS ASSOCIATION, INC.					
Principal Place of Business 5501 RAYENWOOD DR SARASOTA, FL 34243			Mailing Address 5501 RAYENWOOD DR SARASOTA, FL 34243		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		4. FEI Number 59-2727810
5. Certificate of Status Desired ☐					Applied For ☐ Not Applicable
6. Name and Address of Current Registered Agent PAYNE, DOUGLAS C 5501 RAVENWOOD DRIVE SARASOTA, FL 34243					7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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 _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D AYERS, ALTON 5787 RAVENWOOD DRIVE SARASOTA, FL 34243	☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CARRIE EBINGER 6245 MURKWOOD CT. SARASOTA, FL 34243
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD KLINE, WILLIAM 5623 RAVENWOOD DRIVE SARASOTA, FL 34243	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Douglas C. Payne 5501 RAVENWOOD DR SARASOTA, FL 34243
☐ Change ☒ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V AUSTIN, J.W. 3944 TRENTWOOD PLACE SARASOTA, FL 34243	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Change ☐ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HARVEY, JERRY 5632 RAVENWOOD DRIVE SARASOTA, FL 34243	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Change ☐ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRINK, DANIEL 5766 RAVENWOOD DRIVE SARASOTA, FL 34247	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Change ☐ Addition					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCLELLAN, PETE 3800 RAVENWOOD PLACE SARASOTA, FL 34243	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
☐ Change ☐ Addition					
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>Jerry W Harvey III</u> 3/16/06 941-358-7778 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #					

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