

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 749061

FILED
Mar 04, 2004
Secretary of State**Entity Name:** FLYING LITTLE RIVER HOME OWNER'S ASSOCIATION, INC.**Current Principal Place of Business:**P.O. BOX 81
MCALPIN, FL 32062 US**New Principal Place of Business:****Current Mailing Address:**P.O. BOX 81
MCALPIN, FL 32062 US**New Mailing Address:****FEI Number:** 59-2542409**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**WOOLRIDGE, HARRY
18450 73RD PL
MC ALPIN, FL 32062 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: MATTHEWS, FRANKLIN
Address: 18663 75TH PL
City-St-Zip: MC ALPIN, FL 32062

Title: PD () Delete
Name: WOOLRIDGE, HARRY
Address: 18450 73RD PL
City-St-Zip: MC ALPIN, FL 32062

Title: SD () Delete
Name: FOSTER, DENA
Address: 18424 75TH PL
City-St-Zip: MC ALPIN, FL 32062

Title: D () Delete
Name: SIMS, DAVID
Address: 11248 77TH PL
City-St-Zip: MC ALPIN, FL 32062

Title: D () Delete
Name: DALY, KAY
Address: 272 79TH AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: TD () Delete
Name: BROWN, BARBARA
Address: 18230 77TH PLACE
City-St-Zip: MCALPIN, FL 32062

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: JONES, GORDON
Address: 18094 77TH PL
City-St-Zip: MC ALPIN, FL 32062

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: DALY, KAY
Address: 272 79TH AVE NE
City-St-Zip: SAINT PETERSBURG, FL 33702

Title: () 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: HARRY WOOLDRIDGE

PD

03/04/2004

Electronic Signature of Signing Officer or Director

Date

D RALPH SPARKS
7360 188TH PL
MCALPIN, FL 32062