

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 04, 2008 8:00 am
Secretary of State

03-04-2008 90016 040 ****61.25

DOCUMENT # 750208	
1. Entity Name STILL WATERS HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business JILL DOOLEY 4325 STILLWATERS DR MERRITT ISLAND FL 32952 US	Mailing Address MERRYL BLACK 4350 STILLWATERS DR MERRITT ISLAND FL 32952 US
--	---



2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/07)

City & State	City & State
Zip	Country

4. FEI Number 59-2183856	Applied For ☐ Not Applicable
------------------------------------	--

5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
---	---------------------------------------

6. Name and Address of Current Registered Agent EDINGER, JILL 4325 STILLWATERS DR MERRITT ISLAND FL 32952	
---	--

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 resigning.) DATE _____

FILE NOW: FEE IS \$61.25 Due By May 1, 2008	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	PD SPAKE, GREG 4305 STILLWATERS DR MERRITT ISLAND FL 32952	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD. DEIGNAN, JIM. 4365 Stillwater Dr MERRITT Island FL 32952	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD GUYAN, CHERYL 4310 STILLWATER DR MERRITT ISLAND FL 32952	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S.D. SPAKE, JANE 4305 Stillwater Dr MERRITT ISLAND FL 32952	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD BLACK, MERRYL 4350 STILLWATER DR MERRITT ISLAND FL 32952	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SMITH, BRIAN 4320 STILLWATER DR MERRITT ISLAND FL 32952	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Guyan Cheryl. 4310 Stillwater Dr MERRITT Island FL 32952	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DEIGNAN, JODI 4365 STILLWATER DR MERRITT ISLAND FL 32952	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Jim, Dooley 4325 Stillwater Dr MERRITT Island. FL 32952.	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Merryl Black* MERRYL BLACK 02/26/08 321-449-7786