2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT#751471

Jul 11, 2005 Secretary of State

Entity Name: VILLAGE OF EARL PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

14217 CAROL MANOR DR. LARGO, FL 33774

Current Mailing Address: New Mailing Address:

14217 CAROL MANOR DR. 14210 CAROL MANOR DR. LARGO, FL 33774 LARGO, FL 33774 US

FEI Number: 59-2472794 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: Name and Address of New Registered Agent:

COHEN, MEL STEVEN A. PIAZZA

14217 CAROL MANOR DRIVE 14210 CAROL MANOR DRIVE LARGO, FL 33774 LARGO, FL 33774

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: STEVEN A. PIAZZA 07/11/2005

> Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

VTD () Delete (X) Change () Addition

COHEN, MEL COHEN, MEL Name: Name: 14217 CAROL MANOR DRIVE Address: 14217 CAROL MANOR DRIVE Address:

City-St-Zip: LARGO, FL City-St-Zip: LARGO, FL

Title: SD Title: () Delete () Change () Addition

Name: COHEN, JAN Name: Address: 14217 CAROL MANOR DRIVE Address: City-St-Zip: LARGO, FL City-St-Zip:

Title: () Delete Title: (X) Change () Addition ZERDEN, HERB Name: PIAZZA, STEVEN A Name:

14201 CAROL MANOR DR 14210 CAROL MANOR DR Address: Address:

City-St-Zip: LARGO, FL City-St-Zip: LARGO, FL

Title: PD () Delete Title: VPD (X) Change () Addition

Name: SCHULMAN, MIKE Name: SCHULMAN, MIKE

Address: 14223 CAROL MANOR DR Address: 14223 CAROL MANOR DR

City-St-Zip: LARGO, FL City-St-Zip: LARGO, FL

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: STEVEN A PIAZZA D 07/11/2005