

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 755341

FILED
Jan 18, 2006
Secretary of State

Entity Name: SADDLE CLUB ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

771 RANCH RD
WESTON, FL 33326

New Principal Place of Business:

Current Mailing Address:

771 RANCH RD
WESTON, FL 33326

New Mailing Address:

FEI Number: 59-2048979

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

PRITCHARD, KAREN
771 RANCH RD
WESTON, FL 33326 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: PD () Delete
Name: SLUBOWSKI, JERRY
Address: 471 RANCH ROAD
City-St-Zip: WESTON, FL 33326

Title: VD () Delete
Name: PRITCHARD, CAL
Address: 771 RANCH RD
City-St-Zip: WESTON, FL 33326

Title: SD () Delete
Name: PRITCHARD, KAREN
Address: 771 RANCH RD
City-St-Zip: WESTON, FL 33326

Title: TD () Delete
Name: MANNY, TROTMAN
Address: 431 RANCH ROAD
City-St-Zip: WESTON, FL 33326

Title: D () Delete
Name: CARLO, PALAZZESE
Address: 16130 SADDLE LANE
City-St-Zip: WESTON, FL 33326

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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: () Change () Addition
Name:
Address:
City-St-Zip:

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 Chapter 119, 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: KAREN PRITCHARD

SD

01/18/2006

Electronic Signature of Signing Officer or Director

Date