

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 761772

FILED
Mar 07, 2006
Secretary of State

Entity Name: RTO HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

VANGUARD MGMT
9300 N 16 STREET
TAMPA, FL 33612

New Principal Place of Business:

Current Mailing Address:

VANGUARD MGMT
9300 N 16 STREET
TAMPA, FL 33612

New Mailing Address:

FEI Number: 59-2152389

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

WINFIELD, JANET
9300 N 16 STREET
TAMPA, FL 33612 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: P () Delete
Name: HAMMOND, BETSY,
Address: 12207 WOOD DUCK PL
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: ST () Delete
Name: RAMKISSOON, JAI
Address: 3210 SOARING
City-St-Zip: TAMPA, FL 33617

Title: VP () Delete
Name: CLARKE, BEVERLY
Address: 6304 RUNNING RIVER PL.
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D () Delete
Name: BLYMILLER, BILL
Address: 6220 SOARING AVE
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: D () Delete
Name: ELLIOTT, DOUG
Address: 6212 TANAGER PLACE
City-St-Zip: TAMPA, FL 33617

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: ST (X) Change () Addition
Name: ELLIS, SHIRLEY
Address: 6204 TANAGER PL.
City-St-Zip: TEMPLE TERRACE, FL 33617

Title: VP (X) Change () Addition
Name: NETHERTON, JERRY
Address: 6207 SOARING
City-St-Zip: TEMPLE TERRACE, FL 33617

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

Title: D (X) Change () Addition
Name: MEDER, JAY
Address: 12213 WOOD DUCK PL.
City-St-Zip: TEMPLE TERRACE, FL 33617

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: BETSY HAMMOND

PRES

03/07/2006

Electronic Signature of Signing Officer or Director

Date