

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 19, 2005 8:00 am
Secretary of State

04-19-2005 90398 045 ****61.25

DOCUMENT # 768772	
1. Entity Name PHOENIX SUBDIVISION PHASE II OWNERS ASSOCIATION, INC.	

Principal Place of Business 502 NW 16TH AVE GAINESVILLE, FL 32601 US	Mailing Address 502 NW 16TH AVENUE GAINESVILLE, FL 32601 US
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50038956



2. Principal Place of Business 2106 NW 13TH ST Suite, Apt. #, etc.	3. Mailing Address 2106 NW 13TH ST Suite, Apt. #, etc.
City & State GAINESVILLE FL	City & State GAINESVILLE FL
Zip 32609	Country USA

02012005 Chg-NP CR2E037 (10/03)

4. FEI Number 59-2970664	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent ROGERS, RICHARD 2106 NW 13TH STREET GAINESVILLE, FL 32609	7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code
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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: Richard F. Rogers Jr. DATE: 4/18/05

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT DANIEL, THOMAS A 823 N. MAIN ST. GAINESVILLE, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BLAKE, RODNEY III 3130 S.W 23RD TERRACE GAINESVILLE, FL 32608 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WARREN, MICHAEL 502 NW 16TH AVENUE GAINESVILLE, FL ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHER, STEVEN 5832 SILVER SANOS CIR KEYSTONE HEIGHTS, FL 32656 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CASTILLO, RICARDO 3701 NW 17TH LANE GAINESVILLE, FL 32605 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOSTETTLER, NIKLAUS 2330 SW 31ST PLACE GAINESVILLE, FL 32608 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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: [Signature] Date: 3-30-05 Daytime Phone #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR