2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 17, 2006
Secretary of State

DOCUMENT# 771089

Entity Name: STRATFORD PLACE SOUTH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

790 E VICTORIA CIRCLE
ORMOND BEACH, FL 32174 US

New Principal Place of Business:

792 E VICTORIA CIRCLE
ORMOND BEACH, FL 32174 US

Current Mailing Address:

790 E. VICTORIA CIRCLE
ORMOND BEACH, FL 32174 US

New Mailing Address:

792 E. VICTORIA CIRCLE
ORMOND BEACH, FL 32174 US

FEI Number: 59-2406755 **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:

MCMAHON, ALICIA
790 E. VICTORIA CR
ORMOND BCH, FL 32174 US

Name and Address of New Registered Agent:

SKELLY, JAMES
792 E. VICTORIA CIR
ORMOND BEACH, FL 32174 US

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: JAMES C SKELLY 07/17/2006
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: PS (X) Delete
Name: PEEL, JAMES
Address: 823 N. VICTORIA CIR
City-St-Zip: ORMOND BEACH, FL 32174

Title: VP ( ) Delete
Name: SKELLY, JAMES
Address: 792 E. VICTORIA CIR
City-St-Zip: ORMOND BEACH, FL 32174

Title: D ( ) Delete
Name: MARTENS, ROBERT C
Address: 794 E. VICTORIA CIRCLE
City-St-Zip: ORMOND BCH, FL

Title: D ( ) Delete
Name: LAWRENCE, RICHARD
Address: 793 E. VICTORIA CIRCLE
City-St-Zip: ORMOND BEACH, FL

Title: T ( ) Delete
Name: MCMAHON, ALICIA
Address: 790 E VICTORIA CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

Title: S ( ) Delete
Name: HARRIS, WILLIAM
Address: 815 W. VICTORIA CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change ( ) Addition
Name: DEASON, CRAIG F
Address: 813 W. VICTORIA CIR
City-St-Zip: ORMOND BEACH, FL 32174

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

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

Title: T (X) Change ( ) Addition
Name: SKELLY, JAMES
Address: 792 E VICTORIA CIRCLE
City-St-Zip: ORMOND BEACH, FL 32174

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: JAMES C SKELLY T 07/17/2006
Electronic Signature of Signing Officer or Director Date