2005 FOR PROFIT CORPORATION ANNUAL REPORT (AR)

SIGNATURE: 4

Daniek

SIGNATURE AND TYPED OR PRINTED ARMS OF SIGNING OFFICER OR DIRECTOR

GREGORIO

Feb 15, 2005 8:00 am Secretary of State **DOCUMENT # M70865** 1. Entity Name 02-15-2005 90024 003 ***150 00 FOUR SEASONS HOME OWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 13225 101ST ST. 13225 101ST ST. 50015599 LOT 221 LARGO FL 33773 LOT 221 LARGO FL 33773 2. Principal Place of Business 3. Mailing Address 13225 101⁵¹ Sheet, S.E. Suite, Apt. #, etc. 13225 Suite, Apt. #, etc. CR2E034 (10/04) AR 90 City & State Lot 311 City & State 4. FEI Number Applied For 59-2888792 Florida Not Applicable Zip Zip Country \$8.75 Additional 5. Certificate of Status Desired 33773 U.S.A. Fee Required <u> 33773</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent KAdecki Joseph MEINERT, LORRAINE Street Address (P.O. Box Number's Not Acceptable) 13225 101ST ST. **LOT 221 LARGO FL 33773** Zip Code 33773 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 Tebruary 9, 2005 SIGNATURE ed name of registered egent and title if applicable To Seph RAdecks (NOTE: Registered Agent signature required when reinstating) FILE NOW!!! FEE IS \$150.00 9. Election Campaign Financing After May 1, 2005 Fee Will Be \$550.00 Trust Fund Contribution. Added to Fees Make Check Payable to Florida Department of State OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 10. 11. TITLE TITLE □ Delete GREGORIO, DANIEL NAME STREET ADDRESS 13225 101ST SE #378 STREET ADDRESS LARGO FL 33773 CITY-ST-7IP CITY-ST-7IP TITLE Delete TITLE Secretary ☑ Change Addition Dissette, Lorraine 13225 101 St., S.E., # 130 WOLFE, PATRICIA NAME NAME 13225 101 ST 324 STREET ADDRESS STREET ADDRESS CITY-ST-7IP **LARGO FL 33773** CITY-ST-7IP LARGO, Fl. 33773 Addition TITLE Defete TITLE Change NAME NAME MORRIS, FRANK STREET ADDRESS STREET ADDRESS 13225 101 ST 220 CITY-ST-ZIP **LARGO FL 33773** CITY-ST-ZIP TREASURER TITLE TITLE Change ☐ Addition Delete Johnston, Carol MEINERT, LORRAINE NAME NAME 13225 1015 St., #311 STREET ADDRESS 13225 101ST ST., LOT #221 STREET ADDRESS **LARGO FL 33773** CITY-ST-ZIP CITY-S1-ZIP LAR90, 71, 33773 ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CHY-ST-7P CITY-ST-ZIP THILE Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY+ST-ZIP 12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section \$19.07(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 607, 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.

FILED