## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N0000001359

FILED Jan 30, 2006 Secretary of State

Entity Name: SANCTUARY IV, SUB PHASE B HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

6220 MANATEE AVENUE WEST 11129 SANCTUARY DRIVE BRADENTON, FL 34209 103

BRADENTON, FL 34209

**New Mailing Address: Current Mailing Address:** 

11129 SANCTUARY DRIVE 6220 MANATEE AVENUE WEST BRADENTON, FL 34209

BRADENTON, FL 34209

FEI Number: 01-0627097 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired (X)

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

TREWORGY, EVELYN ERBE, STUART 11120 SANCTUARY DRIVE 6220 MANATEE AVENUE WEST BRADENTON, FL 34209 BRADENTON, FL 34209 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: STUART ERBE 01/30/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

PTSD () Delete (X) Change ( ) Addition

TREWORGY, EVELYN ERBE, STUART Name: Name:

6220 MANATEE AVENUE WEST #103 Address: 11120 SANCTUARY DRIVE Address: City-St-Zip: BRADENTON, FL 34209 City-St-Zip: BRADENTON, FL 34209

Title: VD () Delete Title: (X) Change ( ) Addition

REED, MICHELLE Name: KING, ROBINSON Name:

Address: 6220 MANATEE AVENUE WEST #103 Address: 11129 SANCTUARY DRIVE City-St-Zip: BRADENTON, FL 34209 City-St-Zip: BRADENTON, FL 34209

Title: () Delete Title: (X) Change ( ) Addition JAWITZ, JAWITZ MC CONOUGHEY, KENNETH Name: Name: 6220 MANATEE AVENUE WEST #103 11218 SANCTUARY DRIVE Address: Address:

City-St-Zip: BRADENTON, FL 34209 City-St-Zip: BRADENTON, FL 34209

Title: () Delete Title: ( ) Change (X) Addition

Name: Name: FARRAR, DOUG

Address: Address: 11116 SANCTUARY DRIVE City-St-Zip: City-St-Zip: BRADENTON, FL 34209

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: STUART ERBE Ρ 01/30/2006