

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000002942

FILED
Apr 06, 2006
Secretary of State

Entity Name: EL RED MANOR HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

21 A EL RED MANOR
TAVARES, FL 32778 US

New Principal Place of Business:

31 D EL RED MANOR
TAVARES, FL 32778 US

Current Mailing Address:

21 A EL RED MANOR
TAVARES, FL 32778 US

New Mailing Address:

31 D EL RED MANOR
TAVARES, FL 32778 US

FEI Number: 59-2797615

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

COLLING, LEE J
682 MAITLAND AVE
ALTAMONTE SPRINGS, FL 32701 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: D () Delete
Name: BIGGS, JACK E
Address: 21 A EL RED MANOR
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: VANBUREN, VANA
Address: 20B EL RED MANOR
City-St-Zip: TAVARES, FL 32778 US

Title: D () Delete
Name: BIGGS, JANET
Address: 21A EL RED DR.
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: DROEGE, KARL
Address: 24A DEL RED DR
City-St-Zip: TAVARES, FL 32778

Title: D () Delete
Name: KINNEY, PERRY
Address: 7A EL RED DR
City-St-Zip: TAVARES, FL 32778

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: THOMAS, HAROLD E
Address: 12 A EL RED MANOR
City-St-Zip: TAVARES, FL 32778

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

Title: D (X) Change () Addition
Name: HENDERSHOT, JAMES
Address: 31D EL RED DR.
City-St-Zip: TAVARES, FL 32778

Title: D (X) Change () Addition
Name: MORGAN, MARY ANN
Address: 26 B EL RED DR
City-St-Zip: TAVARES, FL 32778

Title: D (X) Change () Addition
Name: ZICKAFOOSE, BILL
Address: 29B EL RED DR
City-St-Zip: TAVARES, FL 32778

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 HENDERSHOT

DVP

04/06/2006

Electronic Signature of Signing Officer or Director

Date