

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N00000006990

FILED
Jul 01, 2005
Secretary of State

Entity Name: SILVER PINES POINTE PHASE 2 HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

75 GATLIN AVE.
SUITE A
ORLANDO, FL 32806

New Principal Place of Business:

Current Mailing Address:

75 GATLIN AVE.
SUITE A
ORLANDO, FL 32806

New Mailing Address:

FEI Number: 59-2951883 **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:

Name and Address of New Registered Agent:

WARREN, NANCY
ENCORE PROPERTY MGMT LLC
75 GATLIN AVE, SUITE A
ORLANDO, FL 32806 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: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: WASHINGTON, CAROLYN
Address: 1634 RIDGE POINTE DR
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: LEWIS, WENDY
Address: 1627 RIDGE POINTE DR.
City-St-Zip: ORLANDO, FL 32808

Title: D () Delete
Name: WILLIAMS, JAMES
Address: 5708 GOLF CLUB PARKWAY
City-St-Zip: ORLANDO, FL 32808

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: WASHINGTON, CAROLYN
Address: 1634 RIDGE POINTE DR
City-St-Zip: ORLANDO, FL 32808

Title: VP (X) Change () Addition
Name: LEWIS, WENDY
Address: 1627 RIDGE POINTE DR.
City-St-Zip: ORLANDO, FL 32808

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

Title: S () Change (X) Addition
Name: RODGERS, KAREN
Address: 1532 RIDGE POINTE DR.
City-St-Zip: ORLANDO, FL 32808

I hereby certify that the information supplied with this filing does not qualify for the 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 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 WILLIAMS

D

07/01/2005

Electronic Signature of Signing Officer or Director

Date