2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 06, 2006
Secretary of State

DOCUMENT# N01000001343

Entity Name: THE ESTATES OF SIMS CREEK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

107 MAGIC WAY
JUPITER, FL 33458

New Principal Place of Business:

Current Mailing Address:

107 MAGIC WAY
JUPITER, FL 33458

New Mailing Address:

FEI Number: 65-1103987 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

CIOFFI, JAMES A
200 TEQUESTA DR, STE 200
TEQUESTA, FL 34469 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: PD ( ) Delete
Name: VASSALLO, BRIAN P
Address: 116 MAGIC WAY
City-St-Zip: JUPITER, FL 33458

Title: VD ( ) Delete
Name: SCHEINER, HOWARD
Address: 104 MAGIC WAY
City-St-Zip: JUPITER, FL 33458

Title: SD ( ) Delete
Name: GASH, TERRIE
Address: 108 MAGIC WAY
City-St-Zip: JUPITER, FL 33458

Title: TD ( ) Delete
Name: SIEBENECK, ROSEMARIE T
Address: 5822 STONEWOOD COURT
City-St-Zip: JUPITER, FL 33458

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: VD (X) Change ( ) Addition
Name: FRALEY, ELISA
Address: 107 MAGIC WAY
City-St-Zip: JUPITER, FL 33458

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

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: ROSEMARIE T. SIEBENECK TD 03/06/2006
Electronic Signature of Signing Officer or Director — Date