

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90265 016 ****61.25

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1. Entity Name

SYMMES GROVE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

STERLING MANAGEMENT
2880 SCHERER DRIVE, STE 840
SAINT PETERSBURG FL 33716

STERLING MANAGEMENT
2880 SCHERER DRIVE, STE 840
SAINT PETERSBURG FL 33716



2. Principal Place of Business

3. Mailing Address

~~Sterling Management Services~~
2870 Scherer Drive N., Suite 100
St. Petersburg, FL 33716

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2870 Scherer Drive N., Suite 100
St. Petersburg, FL 33716

1st MOORE

CR2E037 (10/05)

4. FEI Number

03-0474651

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

COTTERILL, RONALD
400 N TAMPA ST, STE 2625
TAMPA FL 33602

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE P ☐ Delete
NAME HALLEY, MINDY
STREET ADDRESS 11721 IVY FLOWER LOOP
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE V ☒ Delete
NAME BOYD, CHUCK
STREET ADDRESS 11407 IVEY FLOWER LOOP
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE S ☐ Delete
NAME AROCHENNA, DIANA
STREET ADDRESS 11409 IVEY FLOWER LOOP
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE T ☐ Delete
NAME GOLCADAY, JOSHUA
STREET ADDRESS 11717 IVEY FLOWER LOOP
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE D ☐ Delete
NAME DEMELLO, KEITHA
STREET ADDRESS 11376 IVEY FLOWER LOOP
CITY-ST-ZIP RIVERVIEW FL 33569

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with any other like empowered.

SIGNATURE:

Mindy Halley, President

3/13/6

813-671-9883