## 2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N02770

FILED Apr 26, 2004 Secretary of State

Entity Name: HONEYTREE NORTH GARDEN HOMES HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 949 BUTTERCUP DR LAKELAND, FL 33801 **Current Mailing Address: New Mailing Address:** 949 BUTTERCUP DRIVE LAKELAND, FL 33801 US FEI Number: 59-2450473 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( ) Name and Address of Current Registered Agent: Name and Address of New Registered Agent: ELLIS, BEVERLY 949 BUTTERCUP DRIVE LAKELAND, FL 33801 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BROWN, SHARON S Name: Name: 913 BUTTERCUP DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: Title: Title: ( ) Delete () Change () Addition Name: HAYES, JANET Name: Address: 844 BUTTERCUP DR Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: Title: () Delete Title: () Change () Addition ELLIS, BEVERLY Name: Name: 949 BUTTERCUP DR Address: Address: City-St-Zip: LAKELAND, FL City-St-Zip: Title: ( ) Delete Title: D (X) Change ( ) Addition DRAWDY, PATRICIA Name: Name: ELLIS, JAY 918 BUTTERCUP DR Address: Address: 949 BUTTERCUP DR City-St-Zip: LAKELAND, FL 33801 City-St-Zip: LAKELAND, FL 33801 Title: () Delete Title: () Change () Addition HAYES, GREGORY Name: Name: 844 BUTTERCUP DRIVE Address: Address: City-St-Zip: LAKELAND, FL 33801 City-St-Zip: Title: () Delete Title: () Change () Addition MONACO, ROBERT Name: Name: Address: 853 BUTTERCUP DRIVE Address: LAKELAND, FL City-St-Zip: City-St-Zip:

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: BEVERLY ELLIS ST 04/26/2004