

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000001563

FILED  
Apr 14, 2006  
Secretary of State

**Entity Name:** SANTA FE AT STAGECOACH HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

PO BOX 2157  
OLDSMAR, FL 34677

**New Principal Place of Business:**

3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683

**Current Mailing Address:**

PO BOX 2157  
OLDSMAR, FL 34677

**New Mailing Address:**

PO BOX 1418  
PALM HARBOR, FL 34682

**FEI Number:** 56-2327909

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

HANSON, JACK  
3974 TAMPA RD.  
SUITE B  
OLDSMAR, FL 34677 US

**Name and Address of New Registered Agent:**

HANSON, JACK  
MELROSE MANAGEMENT GROUP  
3527 PALM HARBOR BLVD  
PALM HARBOR, FL 34683 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: JACK B HANSON

04/14/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: DISPENZA, SCOTT  
Address: 9950 PRINCESS PALM AVE STE 102  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: FEZZEY, CAROL R  
Address: 9950 PRINCESS PALM AVE STE 102  
City-St-Zip: TAMPA, FL 33619

Title: D ( ) Delete  
Name: FRANKEL, SHERYL  
Address: 9950 PRINCESS PALM AVE STE 102  
City-St-Zip: TAMPA, FL 33619

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

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: REDDICK, QUIETA H  
Address: 3414 BROKERN BOW DR  
City-St-Zip: LAND O'LAKES, FL 34639

Title: VPD (X) Change ( ) Addition  
Name: KUSLANSKY, NATHAN  
Address: 3334 SANTA RITA LANE  
City-St-Zip: LAND O'LAKES, FL 34639

Title: SD (X) Change ( ) Addition  
Name: GIRVIN, LAYNE  
Address: 3421 RED ROCK DR  
City-St-Zip: LAND O'LAKES, FL 34639

Title: TD ( ) Change (X) Addition  
Name: ROSENHOUSE, JILL  
Address: 3338 SANTA RITA LANE  
City-St-Zip: LAND O'LAKES, FL 34639

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: JACK B HANSON

AGEN

04/14/2006

Electronic Signature of Signing Officer or Director

Date