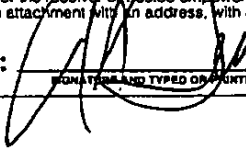


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2005 8:00 am
Secretary of State

02-21-2005 90067 011 ****61.25

DOCUMENT # N03000002102			
1. Entity Name STERLING RANCH ESTATES HOMEOWNER'S ASSOCIATION, INC.			
Principal Place of Business 13190 STERLING RD., S.W. RANCHES, FL 33330		Mailing Address 13190 STERLING RD., S.W. RANCHES, FL 33330	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
02032005		Chg-NP CR2E037 (10/03)	
4. FEI Number APPLIED FOR 54-272256		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	
LEGAL INFORMATION SERVICES, INC. 2500 WESTON ROAD SUITE 404 FORT LAUDERDALE, FL 33331		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 _____			
Filing Fee is \$61.25 Due by May 1, 2005		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 NAME STREET ADDRESS CITY-ST-ZIP	PDS BELL, RICHARD 13190 STERLING RD., S.W. RANCHES, FL 33330 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Pres./Treas./D. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VOT NUDELMAN, JEFF 13190 STERLING RD., S.W. RANCHES, FL 33330 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	Sec./D. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COHEN, MARSHALL 13190 STERLING RD., S.W. RANCHES, FL 33330 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V.P./D. ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify 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 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 all other like empowered.			
SIGNATURE: 		Typed Name: Richard A. Bell, President Date: 2/15/05 Phone: 954-699-0454	

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