

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000003442

FILED
Jul 04, 2004
Secretary of State**Entity Name:** RESERVE ON ROCK LAKE HOMEOWNERS ASSOCIATION, INC.**Current Principal Place of Business:**5902 FITZGERALD ROAD
ODESSA, FL 33556**New Principal Place of Business:****Current Mailing Address:**5902 FITZGERALD ROAD
ODESSA, FL 33556**New Mailing Address:****FEI Number:** 20-0547917**FEI Number Applied For ()****FEI Number Not Applicable ()****Certificate of Status Desired ()****Name and Address of Current Registered Agent:**FUENTES, LAWRENCE E
FUENTES AND KREISCHER, P.A.
1407 WEST BUSCH BOULEVARD
TAMPA, FL 33612 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: MCGILL, BRETT
Address: 5902 FITZGERALD ROAD
City-St-Zip: ODESSA, FL 33556**Title:** VPD () Delete
Name: CREIGHTON, ROBERT
Address: 5913 FITZGERALD ROAD
City-St-Zip: ODESSA, FL 33556**Title:** STD () Delete
Name: EMBODY, DEREK
Address: 6001 FITZGERALD ROAD
City-St-Zip: ODESSA, FL 33556**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:****Title:** () Change () Addition
Name:
Address:
City-St-Zip:**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 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: BRETT MCGILL

PD

07/04/2004

Electronic Signature of Signing Officer or Director

Date