

2006 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED

2006 OCT -3 PM 12: 52

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N03000003729	
1. Entity Name SADDLE CREEK VILLAGE OWNERS ASSOCIATION, INC.	



Principal Place of Business 2905 JACQUE LEE LN LAKELAND, FL 33803	Mailing Address 2905 JACQUE LEE LN LAKELAND, FL 33803
-------------------------------------------------------------------------	-------------------------------------------------------------

2. Principal Place of Business 620 Laurel Lane Suite, Apt. #, etc.	3. Mailing Address 620 Laurel Lane Suite, Apt. #, etc.
--------------------------------------------------------------------------	--------------------------------------------------------------

City & State Lakeland, FL	City & State Lakeland, FL
Zip 33813	Country USA

09272006 Chg-NP CR2E037 (4/06)

4. FEI Number 20-0433859	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent INTERSTATE REGISTERED AGENT CORPORATION 701 BRICKELL AVE STE 3000 MIAMI, FL 33131

7. Name and Address of New Registered Agent	
Name	
Street Address (P.O. Box Number is Not Acceptable)	
City	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 _____ DATE _____

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

Amended AR is \$61.25	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
-----------------------	--------------------------------------------------------------------------------------------------------------	---------------------------------------------------

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input type="checkbox"/> Delete
D KENT, JERARD A 2905 JACQUE LEE LN LAKELAND, FL 33803	
D KENT, SHIRLEY W 2905 JACQUE LEE LN LAKELAND, FL 33803	
D GREEN, ROBERT F 1880 N CRYSTAL LAKE DR #32 LAKELAND, FL 33801	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	
<input type="checkbox"/> Delete	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
D Kent, Jerard A. 620 Laurel Lane Lakeland, FL 33813	
D Kent, Shirley W. 620 Laurel Lane Lakeland, FL 33813	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	
<input type="checkbox"/> Change <input type="checkbox"/> Addition	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: Jerard A. Kent Date: Sept 29, 2006 Daytime Phone #: 863-665-8242

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

10/4