2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2005 8:00 am
Secretary of State
04-21-2005 90229 038 ****61.25

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1. Entity Name
SEMINOLE PALMS OF LARGO HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O LELAND MANAGEMENT 8009 S ORANGE AVE ORLANDO, FL 32809	C/O LELAND MANAGEMENT 8009 S ORANGE AVE ORLANDO, FL 32809

04082005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 51-0481310 ☐ 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
LELAND MANAGEMENT INC. 1633 E. VINE ST. SUITE 110 KISSIMMEE, FL 34744	Name Leland Management Street Address 8009 South Orange Avenue Orlando, FL 32809 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 Richard Lubin agent 4/8/2005
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	PD VERNON, JAMES M 1721 RAINBOW DRIVE CLEARWATER, FL 33755	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Samantha Shorr 8767 Abbey Lane Largo, FL 33771	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD STEFFENS, LOU 2630 SO. FALKENBURG ROAD RIVERVIEW, FL 33569	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Erin K. Barnett 8852 Christie Drive Largo, FL 33771	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	STD HOVE, LOUISE 1721 RAINBOW DRIVE CLEARWATER, FL 33755	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Treasurer Scott Crone 8886 Christie Drive Largo, FL 33771	☐ 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: Samantha Shorr 4.18.05 (727) 686-7688
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #