

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000005637

FILED
Apr 29, 2008
Secretary of State

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

Current Principal Place of Business:

C/O LELAND MANAGEMENT
8009 S ORANGE AVE
ORLANDO, FL 32809

New Principal Place of Business:

C/O LELAND MANAGEMENT
5955 T.G. LEE BLVD., STE. 300
ORLANDO, FL 32822

Current Mailing Address:

C/O LELAND MANAGEMENT
8009 S ORANGE AVE
ORLANDO, FL 32809

New Mailing Address:

C/O LELAND MANAGEMENT
5955 T.G. LEE BLVD., STE. 300
ORLANDO, FL 32822

FEI Number: 51-0481310

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

LELAND MANAGEMENT INC.
8009 S ORANGE AVE
ORLANDO, FL 32809 US

Name and Address of New Registered Agent:

LELAND MANAGEMENT INC.
5955 T.G. LEE BLVD., STE. 300
ORLANDO, FL 32822 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: _____

04/29/2008

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: FENGER, SAMANTHA
Address: 8767 ABBEY LANE
City-St-Zip: LARGO, FL 33771

Title: S () Delete
Name: BISHARA, MICHAEL
Address: 8761 ABBEY LANE
City-St-Zip: LARGO, FL 33771

Title: T () Delete
Name: CRONE, SCOTT
Address: 8886 CHRISTIE DR
City-St-Zip: LARGO, FL 33771

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: P (X) Change () Addition
Name: CRONE, SCOTT
Address: 8886 CHRISTIE DR
City-St-Zip: LARGO, FL 33771

Title: VP (X) Change () Addition
Name: FENGER, SAMANTHA
Address: 8767 ABBEY LANE
City-St-Zip: LARGO, FL 33771

Title: S (X) Change () Addition
Name: DVORAK, JEFFERY S
Address: 8770 CHRISTIE DR.
City-St-Zip: LARGO, FL 33771

Title: T () Change (X) Addition
Name: FLOYD, LOUIS
Address: 8792 CHRISTIE DR
City-St-Zip: LARGO, FL 33771

I hereby certify that the information supplied with this filing does not qualify 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: SCOTT CRONE

P

04/29/2008

Electronic Signature of Signing Officer or Director

Date