## 2005 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

SIGNATURE:

SIGNATURE AND TYPED OR

## Apr 29, 2005 8:00 am Secretary of State DOCUMENT # N03000007872 1. Entity Name 04-29-2005 90174 047 \*\*\*\*61.25 FERN GLEN HOMEOWNERS ASSOCIATION, INC. Mailing Address Principal Place of Business 3810 NORTHDALE BLVD STE 100 TAMPA FL 35634 **DUU444ZU** 3810 NORTHDALE BLVD STE 100 **TAMPA FL 33624** 2. Principal Place of Business 28fo-Scherer Dr N Suite, Apt. #, etc. 1st MOORE CR2E037 (10/04) City & State 4. FEI Number Applied For 20-0232645 Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent O'BRIEN, MATT 3810 NORTHDALE BLVD STE 100 **TAMPA FL 33624** VW CUT 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 the obligations of gistered ag (NOTE Registered Agent signature required when reinstating) **FILE NOW: FEE IS \$61.25** 9. Election Campaign Financing Make Check Payable to **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2005 Added to Fees Florida Department of State 10 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ☐ Change ☐ Addition NOBLE, GARTH Jim NAME NAME 3810 NORTHDALE BLVD STE 100 19027 Fern Meadow Loap STREET ADDRESS STREET ADDRESS **TAMPA FL 33624** CITY-ST-ZIP CITY-ST-ZIP 3355 R SD TITLE Delete TITLE Change ☐ Addition Jae MIHCLOCH, BRIAN NAME NAME Meadow Loop 3810 NORTHDALE BLVD STE 100 Fern STREET ADDRESS STREET ADDRESS **TAMPA FL 33624** CITY-ST-ZIP CITY-ST-ZIP 33558 TD Delete ☐ Change ☐ Addition TITLE TITLE Jan MAZUCHOWSKI, JOHN NAME NAME Fern Meadow Loop 3810 NORTHDALE BLVD STE 100 STREET ADDRESS STREET ADDRESS TAMPA FL 33624 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TATLE Change ☐ Addition Howard, Sherri NAME NAME STREET ADDRESS STREET ADDRESS 19116 Fern Meadow Loop CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition Abdul, Vernon NAME NAME 19026 Fern Meadow Loop STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP ☐ Delete Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-7IP CITY-ST-ZIP 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 of 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.

F SIGNING OFFICER OR DIRECTOR

Daytime Phone #