

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N03000009520

FILED
Aug 08, 2005
Secretary of State

Entity Name: TRIPLE E RANCH ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

23700 SW MARTIN HWY.
OKEECHOBEE, FL 34974

New Principal Place of Business:

7208 SAND LAKE ROAD
SUITE 304
ORLANDO, FL 32819

Current Mailing Address:

23700 SW MARTIN HWY.
OKEECHOBEE, FL 34974

New Mailing Address:

7208 SAND LAKE ROAD
SUITE 304
ORLANDO, FL 32819

FEI Number: 51-0547290 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

LEPERE, FRANK J
23700 SW MARTIN HWY.
OKEECHOBEE, FL 34974 US

Name and Address of New Registered Agent:

NOLAN, BARBARA
7208 SAND LAKE ROAD
SUITE 304
ORLANDO, FL 32819 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: BARBARA NOLAN

08/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: LEPERE, FRANK
Address: 23700 SW MARTIN HWY.
City-St-Zip: OKEECHOBEE, FL 34974

Title: VD () Delete
Name: HAZELLIEF, DAVID
Address: 4351 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

Title: STD () Delete
Name: HAZELLIEF, BETTY
Address: 4351 HWY 441 NORTH
City-St-Zip: OKEECHOBEE, FL 34972

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

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: EMMONS, MICHAEL T
Address: 7208 SAND LAKE ROAD, STE. 304
City-St-Zip: ORLANDO, FL 32819

Title: VPD (X) Change () Addition
Name: NOLAN, BARBARA
Address: 7208 SAND LAKE ROAD, STE 304
City-St-Zip: ORLANDO, FL 32819

Title: ST (X) Change () Addition
Name: LIND, LISA
Address: 7208 SAND LAKE ROAD, STE 304
City-St-Zip: ORLANDO, FL 32819

Title: D () Change (X) Addition
Name: SWITZER, JEFF
Address: 7208 SAND LAKE ROAD, STE 304
City-St-Zip: ORLANDO, FL 32819

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: BARBARA NOLAN

VPD

08/08/2005

Electronic Signature of Signing Officer or Director

Date