2076 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

DOCUMENT # N03000010019

1. Entity Name

UNHILL AT ERROL ESTATES HOMEOWNERS SSOCIATION, INC.

FILED

May 11, 2006 8:00 am Secretary of State 05-11-2006 90235 035 ****61.25

Principal Place of Business		Mailing Address								
1252 GREEN VISA CIR APOPKA FL 32712		1252 GREEN VISA CIR APOPKA FL 32712								
2. Principal Place of Business		3. Mailing Address				III odina ekki ra kk ra kk i		0022111010 11		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			1st MOORE CR2E037 (10/05)					
City & State		City & State			4. FEI Number 20-1451754				pplied For	
Zip	Country	Zip	Country		5. Certificate of		\$	88.75 Add		
· · · · · · · · · · · · · · · · · · ·	6. Name and Address of Current	Registered Agent		į	7. Name and Ac	Idress of New R		<u></u>		
٠			-Name							
125	RISTAN, JOHN T 2 GREEN VISTA CIRCLE DPKA FL 32712		Street A	Street Address (P.O. Box Number is Not Acceptable)						
-	<i>•</i>		City			······································	FL	Zip Cod	e	
8. The above	named entity submits this statement for	or the purpose of changing its re	gistered office o	or registere	ed agent, or both, i	n the State of Flo		miliar with.	and accept	
	ions of registered agent.	, in ()	J	,						
	A.									
SIGNATURE	Signature, typed or printed name of registered agent	t and title if applicable (NOTE: F	Rogisterød Agent signa	ture required :	when reiostatino)		DATE			
		STANT.				TUSA IN A CONTRA			2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	FILE NOW: FEE IS \$61.25 Due By May 1, 2006	9. Election Camp Trust Fund Cor			\$5.00 May Be Added to Fees	Floric	ke Check la Departi	nent of S		
10.	OFFICERS AND DI		11.	, À	DDITIONS/CHAN	GES TO OFFICE	RS AND DIR	ECTORS IN	10	
NAME STREET ADDRESS CITY-ST-ZIP	D LORETAN, JACK 1252 GREENVISTA CIR. APOPKA FL 32712	☐ Delete	NAME STREET ADDRESS CITY-ST-ZIP					☐ Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D NORMAN, MEGAN 1234 GREENVISTA CIR. APOPKA FL 32712	[⊅a], Delete	TITLE NAME STREET ADDRESS CITY-S1-ZIP	RER il Ap	RY CHAI 133 GREEN DO FA, FL 3	RLES NVISTAC SZZIZ	iRCLE	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BALONICK, JENNIFER 1246 GREENVISTA CIR. APOPKA FL 32712	⊠ Delet <u>e</u>	TITLE NAME STREET ADDRESS CITY+ST-ZIP	A/	OPEA, FL 3 M-Jakiro BEREEN COPKA, FL	32-7/2		4 Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D STALLARD, RANDALL W 3008 WHITE CEDAR CIR. KISSIMMEE FL 34741	⊠ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JEP (1:	FROBER FG GREE POPKA, FU	175 N VI STA 32717	CÁCLE	Change	Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		☐ Defete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		, , ,			☐ Change	Addition	
TITLE NAME EET ADDRESS ONY-ST-ZIP		☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP					Change	☐ Addition	

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Section 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: JOHN LORETAN

John Loreta 5/1/ 407-819