2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000002684

FILED Feb 01, 2005 Secretary of State

Entity Name: SARAMANA COMMUNITY DEVELOPMENT CORPORATION, INC.

Current Principal Place of Business:			New Principal Place	New Principal Place of Business:	
	SE OAKS DR A, FL 34241				
Current Mailing Address:			New Mailing Addres	New Mailing Address:	
	SE OAKS DR A, FL 34241				
FEI Number:		FEI Number Applied For (X)	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and Address of	of New Registered Agent:	
RICE, FRANCES P 4594 CHASE OAKS DR SARASOTA, FL 34241 US					
	named entity รเ of Florida.	bmits this statement for the pu	rpose of changing its registere	ed office or registered agent, or both,	
SIGNATUR	RE:				
Electronic Signature of Registered Agent			nt	Date	
OFFICERS AND DIRECTORS:		ADDITIONS/CHANG	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	DP () E HUNTER, JOHNN 3006 GOODRICH SARASOTA, FL (I AVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV ()E THOMAS, LOREN 1420 - 55 AVE W BRADENTON, FL	EST	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DV () E COLON, JOHN A 7116 VICTORIA O UNIVERSITY PAR		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DS () E FEHR, VIVIAN M 1195 VILLAGIO C SARASOTA, FL		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	DT () E RICE, FRANCES 4594 CHASE OAI SARASOTA, FL	KS DR	Title: Name: Address: City-St-Zip:	() Change () Addition	

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: FRANCES P. RICE DT 02/01/2005