2005 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT

FILED
Oct 14, 2005
Secretary of State

DOCUMENT# N04000007352

Entity Name: CIERRA OAKS HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2320 W. MONTCLAIR RD
LEESBURG, FL 34748

New Principal Place of Business:

882 JACKSON AVE.
WINTER PARK, FL 32789

Current Mailing Address:

P.O. BOX 492358
LEESBURG, FL 34749

New Mailing Address:

882 JACKSON AVE.
WINTER PARK, FL 32789

FEI Number: 42-1658963 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

BAILEY, JR., ELIJAH
2320 W. MONTCLAIR RD
LEESBURG, FL 34748 US

Name and Address of New Registered Agent:

RAY, KEVIN W
882 JACKSON AVE.
WINTER PARK, FL 32789 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: KEVIN W. RAY 10/14/2005
Electronic Signature of Registered Agent Date

OFFICERS AND DIRECTORS:

Title: DP ( ) Delete
Name: BAILEY, JR., ELIJAH
Address: 2320 W. MONTCLAIR RD
City-St-Zip: LEESBURG, FL 34748

Title: DVP ( ) Delete
Name: YOUNG, HERB
Address: 206 N. THIRD ST
City-St-Zip: LEESBURG, FL 34748

Title: DST ( ) Delete
Name: COOK, WENDE
Address: 2320 W. MONTCLAIR RD
City-St-Zip: LEESBURG, FL 34748

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: BROWN, RICKARD
Address: 197 MONTERGOMERY RD. SUITED 120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DVP (X) Change ( ) Addition
Name: WASSERMAN, GREG
Address: 197 MONTERGOMERY RD. SUITE120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

Title: DST (X) Change ( ) Addition
Name: WILCOX II, DOUGLAS F
Address: 197 MONTERGOMERY RD. SUITE 120
City-St-Zip: ALTAMONTE SPRINGS, FL 32714

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: RICHARD BROWN DP 10/14/2005
Electronic Signature of Signing Officer or Director Date