2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 11, 2005
Secretary of State

DOCUMENT# N04000009845

Entity Name: SWINTON GARDENS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

35 SWINTON GARDENS DR
DELRAY BEACH, FL 33444

New Principal Place of Business:

Current Mailing Address:

35 SWINTON GARDENS DR
DELRAY BEACH, FL 33444

New Mailing Address:

FEI Number: 02-0730950 **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:

LEONARD, LOVETT
35 SWINTON GARDENS DR
DELRAY BEACH, FL 33444 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: P ( ) Delete
Name: LEONARD, LOVETT
Address: 35 SWINTON GARDENS DR
City-St-Zip: DELRAY BEACH, FL 33444

Title: V ( ) Delete
Name: FULTON, PAUL
Address: 15 SWINTON GARDENS DR
City-St-Zip: DELRAY BEACH, FL 33444

Title: S ( ) Delete
Name: MCMILLIAN, TONI
Address: 19 SWINTON GARDENS DR
City-St-Zip: DELRAY BEACH, FL 33444

Title: S ( ) Delete
Name: ZANDERS, CINDY
Address: 22 SWINTON GARDENS DR
City-St-Zip: DELRAY BEACH, FL 33444

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

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: LOVETT LEONARD PRES 07/11/2005

Electronic Signature of Signing Officer or Director — Date