

**2011 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Oct 05, 2011**  
**Secretary of State**

DOCUMENT# N04000010964

**Entity Name:** HOMEOWNER'S ASSOCIATION OF OSPREY COVE, INC.**Current Principal Place of Business:**2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 327795044 US**New Principal Place of Business:**2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US**Current Mailing Address:**2180 WEST SR 434, SUITE 5000  
LONGWOOD, FL 327795044 US**New Mailing Address:**2180 WEST SR 434  
SUITE 5000  
LONGWOOD, FL 327795044 US**FEI Number:** 57-1214741**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**CONRADO, SANDRA L  
1069 OSPREY COVE CR  
GROVELAND, FL 34736 US**Name and Address of New Registered Agent:**HART, JAMES W JR  
SENTRY MANAGEMENT INC  
2180 WEST SR 434 STE 5000  
LONGWOOD, FL 32779 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: JAMES W HART JR

10/05/2011

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: POLAND, NICHOLAS  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: VPD  
Name: LAYNE, OMAR  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: SD  
Name: SMITH, CAMMY  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: TD  
Name: JACKSON, RONDA  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

Title: D  
Name: CONRADO, ED  
Address: 2180 WEST SR 434 STE 5000  
City-St-Zip: LONGWOOD, FL 32779

I hereby 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 all other like empowered.

SIGNATURE: NICHOLAS POLAND

PD

10/05/2011

Electronic Signature of Signing Officer or Director

Date