2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 23, 2007 8:00 am Secretary of State

DOCUMENT # N04000011208 1. Entity Name TREETOP RESIDENTIAL OWNERS ASSOCIATION, INC.					;. (t)		40	04-23-2007	90053 047 **	**61.25
Principal Place 348 ENTERP VALDOSTA, G	RISE DRIVE		348 E	Address NTERPRISE DRIV ISTA, GA 31601			1 18 2 11 2 1 2 2 2 4 1 1 1 1 1 1 1 1 1 1 1	81911 24 171 33 191 33 (1)	. BE(B) 2186) ([G]) A	8181 JULIUU WE 1881
Principal Place of Business - No P.O. Box # 3. Ma			3. Mailir	3. Mailing Address						
Suite, Apt. #, etc.			Suite	Suite, Apt. #, etc.			02222007 C	hg-NP	CR2E037 (12/	06)
City & State			City	City & State			4. FEI Number 20-270980	03		Applied For Not Applicable
Zip Country Zip			Zip	Coun		try	5. Certificate of Status De		□ \$8.75 Fee Re	Additional quired
	6. Name	and Address of Curren	Registered	Agent		7. Name and Address of New Registered Agent				
HALL STE	VENK					Name				
HALL, STEVEN K 4399 COMMONS DRIVE EAST						Street Add	ress (P.O. Box Number is	Not Acceptable)	
SUITE 300					-					
DESTIN, F	L 32541									
						City FL Zip Code				
8. The above	named entity	submits this statement t	or the purpo	se of changing its	registered	office or re	gistered agent, or both, in	n the State of Flo	rida. Lam familiar	with, and accept
the obligat	ions of registe	ered agent.								
SIGNATURE .	Slanstore Whert	or printed name of registered ager	and title if some	able (NOTE	F: Penistered &	Anont sometime (equired when reinstating)		DATE	
	orginalisti, (fp.00				L riegistered re	ngsitt algitations i				
Filing Fee Is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.							
10.							\$5.00 May Be Added to Fees		ake check paya ida Department	
			IRECTORS				\$5.00 May Be Added to Fees	Flori	ida Department	of State
TITLE	Р	lay 1, 2007	IRECTORS	Trust Fund C	Contribution	n.	Added to Fees ADDITIONS/CHANG	Flori GES TO OFFICER	ida Department	of State RS IN 10
NAME	BENNETT	OFFICERS AND D	IRECTORS		Contribution 11.	n.	Added to Fees ADDITIONS/CHANG	Flori GES TO OFFICER	ida Department	of State RS IN 10
NAME STREET ADDRESS	BENNETT 348 ENTE	OFFICERS AND D , JOHN RPRISE DRIVE	IRECTORS	Trust Fund C	11. IIILE NAME STREET	VP, S,	ADDITIONS/CHANCE ADDITIONS/CH	Flori GES TO OFFICE Orice Liten La	Ida Department RS AND DIRECTO Ch Keshore	of State RS IN 10 ange
NAME	BENNETT 348 ENTE VALDOST	OFFICERS AND D	IRECTORS	Trust Fund C	11. IIILE NAME	VP, S)	Added to Fees ADDITIONS/CHANCE Rebecca (236 N Na Panama C	Flori BES TO OFFICE Drice Liten Lal	Ida Department RS AND DIRECTO Ch Keshore R3240	of State RS IN 10 ange Addition Dr
NAME STREET ADDRESS CITY-ST-ZIP	BENNETT 348 ENTE VALDOST VP	OFFICERS AND D , JOHN RPRISE DRIVE A, GA 31601	IRECTORS	Trust Fund C	11. IIILE NAME STREET CITY-S	VP, S,	Added to Fees ADDITIONS/CHANCE Rebecca (236 N Na Panama C Tom Ledm	Flori BES TO OFFICE Drice Liton La Lity Bch	Ida Department RS AND DIRECTO Ch Keshore	of State RS IN 10 ange Addition Dr
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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 eath; that I am an officer or director of the corporation or the requirement of the corporation or the requirement of the corporation of the requirement of the corporation of the requirement of the report as in 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 propowered.

CITY-ST-ZIP

NAME STREET ADDRESS

SIGNATURE:

NAME

STREET ADDRESS

CITY-ST-ZIP

CE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

16/07 8507742900 Daytime Phone #