2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State
03-22-2006 90007 028 ****61.25

DOCUMENT # N05000001637

1. Entity Name
SEQUOIA PARK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
981 LEMONGRASS LANE WELLINGTON, FL 33414 US	981 LEMONGRASS LANE WELLINGTON, FL 33414 US

03162006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
12826 Peconic ct Suite, Apt. #, etc.	12826 Peconic Court Suite, Apt. #, etc.
City & State: Wellington FL Zip: 33414 Country:	City & State: Wellington FL Zip: 33414 Country:

4. FEI Number: 20-2956415 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
SCHMIDT, JOSEPH 981 LEMONGRASS LANE WELLINGTON, FL 33414	Name: Mario Crespo Street Address (P.O. Box Number is Not Acceptable): 12826 peconic Court City: Wellington FL Zip Code: 33414

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE: Mario Crespo 03-18-06.
(Signature, required when filing) (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ $5.00 May Be Added to Fees	Make check payable to: Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PRES SCHMIDT, JOSEPH 781 LEMONGRASS LANE WELLINGTON, FL 33414	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	President Mario Crespo 12826 Peconic ct Wellington, Florida 33414	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TREASURER IRENE ORNEWSKI P.O. BOX 1268 LOXAHATCHEE, FLORIDA 33470	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Secretary Mildred Crespo 12826 Peconic Court Wellington, Florida 33414	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: Mario Crespo 04-25-06 President H.O.A.
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Date Daytime Phone #