

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N05000011513

FILED
Apr 26, 2006
Secretary of State

Entity Name: ANTHEM PARK HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

5850 TG LEE BLVE STE 600
ORLANDO, FL 32822

New Principal Place of Business:

3434 COLWELL AVE
#200
TAMPA, FL 33614

Current Mailing Address:

5850 TG LEE BLVE STE 600
ORLANDO, FL 32822

New Mailing Address:

3434 COLWELL AVE
#200
TAMPA, FL 33614

FEI Number:

FEI Number Applied For ()

FEI Number Not Applicable (X)

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BARFIELD, WILLIAM E
5850 TG LEE BLVE STE 600
ORLANDO, FL 32822 US

Name and Address of New Registered Agent:

RIZZETTA & COMPANY
3434 COLWELL AVE
#200
TAMPA, FL 33614 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: WILLIAM RIZZETTA

04/26/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DP () Delete
Name: BEAIRD, ROBERT
Address: 5850 TG LEE BLVE STE 600
City-St-Zip: ORLANDO, FL 32822

Title: DVT () Delete
Name: LAWSON, ROBERT
Address: 5850 TG LEE BLVE STE 600
City-St-Zip: ORLANDO, FL 32822

Title: DS () Delete
Name: MURPHY, BRANDY
Address: 5850 TG LEE BLVE STE 600
City-St-Zip: ORLANDO, FL 32822

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:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: ROBERT BEAIRD

DP

04/26/2006

Electronic Signature of Signing Officer or Director

Date