

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 14, 2008 8:00 am
Secretary of State

04-14-2008 90020 029 ****61.25

DOCUMENT # N05000011538 1. Entity Name LE SOLEIL HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 50 SURF SONG LANE #101 MIRAMAR BEACH, FL 32550			Mailing Address 215 GRAND BLVD SUITE 200 MIRAMAR BEACH, FL 32550 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 20-4121504	
Zip		Country		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
GORMLEY, TERRY P 215 GRAND BLVD SUITE 200 MIRAMAR BEACH, FL 32459				Name <u>William A Hopkins</u> Street Address (P.O. Box Number is Not Acceptable) <u>10859 EMERALD EAST PKWY.</u> <u>STE. 4-310</u> City <u>MIRAMAR BEACH</u> FL Zip Code <u>32550</u>	
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 <u>William A Hopkins</u> 4/11/08 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2008		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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	TITLE	NAME
	DP D	SASSANO, RONALD L	50 SURF SONG LANE, #101 MIRAMAR BEACH, FL 32459		
	DST	HOBEROCK, BARBARA	327 LAKE VIEW DR WASHINGTON, MO 63090		
	DP	KUBAS, GEORGE II	PO BOX 770914 LAKEWOOD, OH 44107		
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: <u>George Kubas II, Pres.</u> 4/11/08 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>					