

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N06000012236

FILED  
Feb 05, 2009  
Secretary of State

**Entity Name:** SNELL CREEK MANOR HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

2110-B BOCA RATON DR., STE. 102  
AUSTIN, TX 78747

**New Principal Place of Business:**

2110-B BOCA RATON DR.  
STE. 102  
AUSTIN, TX 78747

**Current Mailing Address:**

2110-B BOCA RATON DR., STE. 102  
AUSTIN, TX 78747

**New Mailing Address:**

2110-B BOCA RATON DR.  
STE. 102  
AUSTIN, TX 78747

FEI Number: 32-0214768

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PRICE, GARY  
525 POPE AVENUE NW  
WINTER HAVEN, FL 33881 US

**Name and Address of New Registered Agent:**

KALOGRIDIS, MITCHELL D  
41040 HIGHWAY 27 NORTH  
DAVENPORT, FL 33837 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: MITCHELL D. KALOGRIDIS

02/05/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: KALOGRIDIS, MITCHELL D  
Address: 2110-B BOCA RATON DR., STE. 102  
City-St-Zip: AUSTIN, TX 78747

Title: D ( ) Delete  
Name: DAVIS, JANICE L  
Address: 2110-B BOCA RATON DR., STE. 102  
City-St-Zip: AUSTIN, TX 78747

Title: D ( ) Delete  
Name: MAY, KRISTINE  
Address: 2110-B BOCA RATON DR., STE. 102  
City-St-Zip: AUSTIN, TX 78747

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DIR (X) Change ( ) Addition  
Name: KALOGRIDIS, MITCHELL D  
Address: 2110-B BOCA RATON DR., STE. 102  
City-St-Zip: AUSTIN, TX 78747

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 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: MITCHELL D. KALOGRIDIS

DIR

02/05/2009

Electronic Signature of Signing Officer or Director

Date