

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jul 23, 2004 8:00 am
Secretary of State

07-23-2004 90004 003 ****61.25

DOCUMENT # N06953 1. Entity Name STRAWBERRY RIDGE HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business C/O JAMES BIESER 105 CHOO CHOO LN VALRICO, FL 33594 US		Mailing Address C/O JAMES BIESER 105 CHOO CHOO LN VALRICO, FL 33594 US	
2. Principal Place of Business ROBERT MARSHALL		3. Mailing Address ROBERT MARSHALL	
Suite, Apt. #, etc. 3419 STATE ROAD 60 EAST		Suite, Apt. #, etc. 3419 STATE ROAD 60 EAST	
City & State VALRICO FLORIDA		City & State VALRICO FLORIDA	
Zip 33594	Country USA	Zip 33594	Country USA
4. FEI Number 59-2358088		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent PHILLIPS, MARY 3574 BERRY BEND RD. VALRICO, FL 33594		7. Name and Address of New Registered Agent Name ALLAN MOODY TREASURER Street Address (P.O. Box Number is Not Acceptable) STRAWBERRY RIDGE HOA 3419 STATE ROAD 60 EAST City VALRICO FL Zip Code 33594	
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 ALLAN MOODY TREASURER Signature, typed or printed name of registered agent and the if applicable.		ALLAN MOODY 7/21/04 (NOTE: Registered Agent signature required when requesting) DATE	
Filing Fee is \$81.25 Due by September 8, 2004		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	VPD ZESKE, EMERICK 3605 CINDER DRIVE VALRICO, FL 33594 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD EARL EMMONS 440 BOXCAR WAY VALRICO FLORIDA 33594 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BOBB, TERRY 3516 ENGINEER DRIVE VALRICO, FL 33594 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ALLAN MOODY 3603 CINDER DRIVE VALRICO FLORIDA 33594 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP MARSHALL, ROBERT 3522 ENGINEER DRIVE VALRICO, FL 33594 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GENE DIANA 113 CHOO CHOO LANE VALRICO FLORIDA 33594 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEISELLE, NORMAN 3414 WHISTLE STOP LANE VALRICO, FL 33594 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BETTY FERRELL 3516 WILDBERRY WAY VALRICO FLORIDA 33594 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD PHILLIPS, MARY 3574 BERRY BEND RD VALRICO, FL 33594 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HARRY HAMILTON 232 TAND CIRCLE VALRICO FLORIDA 33594 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD PENTON, SHARON 411 COASTLINE WAY VALRICO, FL 33594 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D EILEEN DENNIS 3615 CASEY JONES DRIVE VALRICO FLORIDA 33594 ☐ Change ☒ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: ROBERT MARSHALL PRESIDENT SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		G Marshall 7/21/04 813-649-5861 Date Daytime Phone	