

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N12270

FILED
Mar 15, 2005
Secretary of State

Entity Name: ESTANCIA TOWNES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Principal Place of Business:

Current Mailing Address:

4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

New Mailing Address:

FEI Number: 59-2782732

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

REARDON, MAUREEN C
4151 WOODLANDS PARKWAY
PALM HARBOR, FL 34685 US

Name and Address of New Registered Agent:

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:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: SCHARBER, ERIC
Address: 2451 BALBOA CT
City-St-Zip: CLEARWATER, FL 33761

Title: SD () Delete
Name: ANDERSON, CAROL
Address: 2450 BALBOA CT
City-St-Zip: CLEARWATER, FL 33761

Title: TD () Delete
Name: BRZEZINSKI, CHRISTIAN
Address: 244 BALBOA CT
City-St-Zip: CLEARWATER, FL 33761

Title: VPD () Delete
Name: ROYA, DEBBIE
Address: 2445 BALBOA CT
City-St-Zip: CLEARWATER, FL 33761

Title: D () Delete
Name: OAKS, BJ
Address: 2453 BALBOA CT
City-St-Zip: CLEARWATER, FL 33761

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:

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 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 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: ERIC SCHARBER

PD

03/15/2005

Electronic Signature of Signing Officer or Director

Date