


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2004 8:00 am
Secretary of State

02-16-2004 90058 049 ****61.25

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|--|--|---|--|---|--|
| DOCUMENT # N16743 1. Entity Name VALLEY HILL FARMS HOMEOWNERS' ASSOCIATION, INC. | | | |  | |
| Principal Place of Business 34621 VALLEY HILL LANE EUSTIS FL 32736 US | | | | Mailing Address 34621 VALLEY HILL LANE EUSTIS FL 32736 US | |
| 2. Principal Place of Business 34940 VALLEY HILL LANE Suite, Apt. #, etc. | | 3. Mailing Address 34940 VALLEY HILL LANE Suite, Apt. #, etc. | |  | |
| City & State EUSTIS FL Zip 32736 Country US | | City & State EUSTIS FL Zip 32736 Country US | | 4. FEI Number NO-T APPLICABLE | |
| 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required | | | | Applied For Not Applicable | |
| 6. Name and Address of Current Registered Agent NELSON, ROBERT L 34621 VALLEYHILL LN EUSTIS FL 32736 | | | | 7. Name and Address of New Registered Agent Name: GAYLE WITTY Street Address (P.O. Box Number is Not Acceptable): 34940 VALLEY HILL LANE City: EUSTIS FL Zip Code: 32736 | |
| 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: GAYLE WITTY <i>Gayle Witty</i> 2/9/04 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small> | | | | | |
| FILE NOW: FEE IS \$61.25 Due By May 1, 2004 | | 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: PD NAME: THOMAS, HUBBA STREET ADDRESS: VALLEY HILL LANE CITY-ST-ZIP: EUSTIS FL 32736 | <input checked="" type="checkbox"/> Delete | | TITLE: PD NAME: DON PARLAPIANO STREET ADDRESS: 34913 VALLEY HILL LANE CITY-ST-ZIP: EUSTIS, FL 32736 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: VD NAME: LEMERISE, JEANETTE STREET ADDRESS: 34802 VALLEY HILL LANE CITY-ST-ZIP: EUSTIS FL 32736 | <input type="checkbox"/> Delete | | TITLE: VD NAME: GAYLE WITTY STREET ADDRESS: 34940 VALLEY HILL LANE CITY-ST-ZIP: EUSTIS, FL 32736 | <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: STD NAME: NELSON, ROBERT L STREET ADDRESS: 34621 VALLEY HILL LANE CITY-ST-ZIP: EUSTIS FL | <input checked="" type="checkbox"/> Delete | | TITLE: STD NAME: GAYLE WITTY STREET ADDRESS: 34940 VALLEY HILL LANE CITY-ST-ZIP: EUSTIS, FL 32736 | <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition | |
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| TITLE: STD NAME: NELSON, ROBERT L STREET ADDRESS: 34621 VALLEY HILL LANE CITY-ST-ZIP: EUSTIS FL | <input type="checkbox"/> Delete | | TITLE: STD NAME: GAYLE WITTY STREET ADDRESS: 34940 VALLEY HILL LANE CITY-ST-ZIP: EUSTIS, FL 32736 | <input type="checkbox"/> Change <input type="checkbox"/> 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: GAYLE WITTY <i>Gayle Witty</i> 2/9/04 352-357-9696 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small> | | | | | |