

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N17421

FILED
Jan 22, 2006
Secretary of State

Entity Name: VALLEY RANCH HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 341366
TAMPA, FL 33694

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 341366
TAMPA, FL 33694

New Mailing Address:

FEI Number: 59-2745282

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MEIROSE & FRISCIA, P.A.
500 N. WESTSHORE BLVD.
SUITE 830
TAMPA, FL 33609 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: BORDEN, MARY
Address: 3406 VALLEY RANCH DR.
City-St-Zip: LUTZ, FL 33548

Title: TD () Delete
Name: MARCHAND, DAVID
Address: 3428 VALLEY RANCH DR
City-St-Zip: LUTZ, FL 33548

Title: SD () Delete
Name: SOLOCHEK, JEFF
Address: 3414 VALLEY RANCH DRIVE
City-St-Zip: LUTZ, FL 33548

Title: D () Delete
Name: GUMA, PAUL
Address: 3429 VALLEY RANCH DR.
City-St-Zip: LUTZ, FL 33548

Title: VPD () Delete
Name: FERNANDEZ, TERRY
Address: 3431 VALLEY RANCH DRIVE
City-St-Zip: LUTZ, FL 33548

Title: D () Delete
Name: MRACEK, DAVID
Address: 3408 VALLEY RANCH DRIVE
City-St-Zip: LUTZ, FL 33548

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: THATCHER, MARK
Address: 3417 VALLEY RANCH DR.
City-St-Zip: LUTZ, FL 33548

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BORDEN, MARY
Address: 3406 VALLEY RANCH DR.
City-St-Zip: LUTZ, FL 33548

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 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: DAVID P. MARCHAND

TD

01/22/2006

Electronic Signature of Signing Officer or Director

Date