

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N20200

FILED
Feb 06, 2005
Secretary of State

Entity Name: THE SWALLOWS GOLF VILLAS II CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:

99 PUTTERS LANE
DEBARY, FL 32713 US

New Principal Place of Business:

Current Mailing Address:

99 PUTTERS LANE
DEBARY, FL 32713 US

New Mailing Address:

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

HARLAN, PAUL L
431 E. NEW YORK AVE.
DELAND, FL 32724 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: ATWATER, MARTHA
Address: 65 PUTTERS LANE
City-St-Zip: DEBARY, FL 32713

Title: TD () Delete
Name: SICCARDI, ARTHUR J
Address: 6084 GLENDALE DRIVE
City-St-Zip: BOCA RATON, FL 33433

Title: SD () Delete
Name: WINTERHOFF, DIANE
Address: 3916 GLEN ABBY LANE
City-St-Zip: DEBARY, FL 32713

Title: PD (X) Delete
Name: ATWATER, MARTHA S MISS
Address: 65 PUTTERS LANE
City-St-Zip: DEBARY, FL 32713 US

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: ATWATER, MARTHA
Address: 65 PUTTERS LANE
City-St-Zip: DEBARY, FL 32713 US

Title: TD (X) Change () Addition
Name: SICCARDI, ARTHUR J
Address: 63 PUTTERS LANE
City-St-Zip: DEBARY, FL 32713 US

Title: SD (X) Change () Addition
Name: CRANE, JOIE
Address: 44 FAIRWAY DRIVE
City-St-Zip: DEBARY, FL 32713 US

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: ARTHUR J. SICCARDI

TREA

02/06/2005

Electronic Signature of Signing Officer or Director

Date