2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 17, 2006
Secretary of State

DOCUMENT# N23867

Entity Name: ST. CLOUD OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

2812 ST CLOUD OAKS DR
P O BOX 863
VALRICO, FL 335947863 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 863
VALRICO, FL 33594 US

New Mailing Address:

FEI Number: 59-2873359 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

ELMER, MELANIE
2733 ST CLOUD OAKS DRIVE
VALRICO, FL 33594 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:	P	( ) Delete
Name:	ELMER, MELANIE	
Address:	2733 ST CLOUD OAKS DR	
City-St-Zip:	VALRICO, FL 33594	
Title:	D	( ) Delete
Name:	HITT, CAL	
Address:	2726 ST CLOUD OAKS DR.	
City-St-Zip:	VALRICO, FL 33594	
Title:	T	( ) Delete
Name:	WILLIAMS, RUSSELL	
Address:	2721 ST CLOUD OAKS DR.	
City-St-Zip:	VALRICO, FL 33594	
Title:	S	( ) Delete
Name:	CHEEK, CHRISANN	
Address:	2727 ST CLOUD OAKS DR.	
City-St-Zip:	VALRICO, FL 33594	
Title:	V	( ) Delete
Name:	BRADY, JAY	
Address:	2811 ST CLOUD OAKS DR	
City-St-Zip:	VALRICO, FL 33594	
Title:	D	( ) Delete
Name:	LACY, MIKE	
Address:	2728 ST CLOUD OAKS DR	
City-St-Zip:	VALRICO, FL 33594	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	KELLY, BILL	
Address:	2803 ST CLOUD OAKS DR.	
City-St-Zip:	VALRICO, FL 33594	
Title:	T	(X) Change ( ) Addition
Name:	PLACEK, BRADY	
Address:	2715 ST CLOUD OAKS DR.	
City-St-Zip:	VALRICO, FL 33594	
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:		( ) Change ( ) Addition
Name:		
Address:		
City-St-Zip:		
Title:	D	(X) Change ( ) Addition
Name:	STALLWORTH, LYNNE	
Address:	2704 ST CLOUD OAKS DR	
City-St-Zip:	VALRICO, FL 33594	

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: BRADY PLACEK T 04/17/2006

Electronic Signature of Signing Officer or Director — Date