2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT (AR) DOCUMENT # N25204 1. Entity Name



FILED Feb 21, 2005 8:00 am Secretary of State 02-21-2005 90087 048 ****61.25

HOMEOWNERS ASSOCIATION OF SMITH LAKE SHORES, INC.					02	21 2003 90007 0	01.23		
Principal Place of Business		Mailing Address							
9701 E HWY. 25		9701 E HWY. 25				-			
#282 BELLEVIEW FL 34420 US		#282 BELLEVIEW FL 34420 US				10 11081 - 11110 11811 - 111 11 - 11811 - 1	######################################	5 1 10 111	
2. Principal Place of Business		3. Mailing Address							
Suite, Apt. #, etc.		Suite, Apt. #, etc.		,	1st M	OORE CR28	E037 (10/04)		
City & State		City & State			4. FEI Number	59-2878003	No	pplied For at Applicable	
Zíp	Country	Zip	Country		5. Certificate of S	Status Desired	\$8.75 Add Fee Require		
	6. Name and Address of Current	Registered Agent	ed Agent Name			7. Name and Address of New Registered Agent			
081	TRAND, DOLORES H						•		
970	1 E HWY 25		Stre	et Address (1	P.O. Box Number is	Not Acceptable)			
	「#180 .LVIEW FL 34420			-					
			City			-	FL Zip Code		
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									
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE OPERATOR OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF THE PROPERTY OF T									
FILE NOW: FEE IS:\$61.25 Due By; May 1: 2005 9. Election Campaign Financing Trust Fund Contribution.					\$5.00 May Be Added to Fees		eck Payable partment of S		
10.	OFFICERS AND D	RECTORS	11.	,	ADDITIONS/CHAN	GES TO OFFICERS AND	DIRECTORS IN	10	
TITLE NAME	S MURPHY, JEAN	☐ Delete	THTLE				☐ Change	☐ Addition	
STREET ADDRESS	9701 E HWY 25 #190		NAME STREET ADDR	RESS					
CITY-ST-ZIP	BELLEVIÉW FL 34420		CITY-ST-ZIP						
TITLE	T OSTRAND, DOLORES	Delete	TITLE				☐ Change	☐ Addition	
NAME STREET ADDRESS	9701 E HWY 25 #180		NAME STREET ADDR	RESS					
CITY-ST-ZIP	BELLEVIEW FL 34420		CITY-ST-ZIP						
TITLE	D D	. □ Delete	TITLE	PR	ES		☐ Change	Addition	
NAME STREET ADDRESS	FURLONG, JUDY 9701 E HWY 25 #62		NAME STREET ADDE	FUT	RLONG, JU	DY 25 d 6 3			
CITY-ST-ZIP	BELLEVIEW FL 34420		CITY-ST-ZIP	97	LLEVIEW,	FL. 34420			
TITLE	D	Delete	TITLE				☐ Change	Addition	
NAME STORES ADDRESS	MILLER, W M 19701 E HWY 25 #181		NAME						
STREET ADDRESS CITY-ST-ZIP	BELLEVIEW FL 34420		STREET ADDR						
TITLE	V	≯ Delete	TITLE	GE	NE MIZE	V. P	☐ Change	Addition	
NAME CYDEET AGGREGA	SAMPSON, DAVID 9701 E HWY 25 #186		NAME		NE MIZE 01 E HWY 12	S #37			
STREET ADDRESS CITY-ST-ZIP	BELLEVIEW FL 34420		STREET ADDR	I BF.	LLEVIEW,	FL. 344 24			
TITLE	MARLEY, TOM	Defete	TITLE	6			Change	Addition	
NAME STREET ADDRESS	9701 E HWY 25 #97		NAME STREET ADDR	VE	RNON HAS	5KEK 25 # //L			
CITY-ST-ZIP	BELLEVIEW FL 34420		CITY-ST-ZIP	1					
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.

352-245-1479

Daytime Phone #