2006 NOT-FOR-PROFIT CORPORATION

FILED **ANNUAL REPORT (AR)** Feb 06, 2006 8:00 am Secretary of State DOCUMENT # N25204 1. Entity Name 02-06-2006 90086 043 ****61.25 HOMEOWNERS ASSOCIATION OF SMITH LAKE SHORES, Principal Place of Business Mailing Address 9701 E HWY. 25 9701 E HWY. 25 #282 BELLEVIEW FL 34420 BELLEVIEW FL 34420 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State Applied For City & State 4. FEI Number 59-2878003 Not Applicable Country Zip Country Zio \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name OSTRAND, DOLORES H Street Address (P.O. Box Number is Not Acceptable) 9701 E HWY 25 LOT #180 BELLVIEW FL 34420 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. 1-25-06 DATE Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Due By May 1, 2006 Florida Department of State Trust Fund Contribution. Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. OFFICERS AND DIRECTORS 11. TITLE ☐ Delete TITLE Change ☐ Addition MURPHY, JEAN NAME NAME 9701 E HWY 25 #190 STREET ADDRESS STREET ADDRESS BELLEVIEW FL 34420 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change Change ■ Addition OSTRAND, DOLORES NAME NAME 9701 E HWY 25 #180 STREET ADORESS STREET ADDRESS CITY-ST-ZIP BELLEVIEW FL 34420 CITY-ST-ZIP Defete TITLE ☐ Change ☐ Addition TITLE FURLONG, JUDY NAME NAME STREET ADDRESS 9701 E HWY 25 #62 STREET ADDRESS CITY-ST-7IP BELLEVIEW FL 34420 City-St-7/P TITLE Delete TITLE ☐ Change Addition MILLER, W M NAME NAME STREET ADDRESS 9701 E HWY 25 #181 STREET ADDRESS BELLEVIEW FL 34420 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE TITLE ☐ Change ☐ Addition MIZE, GENE NAME NAMÉ 9701 E HWY 25 #37 STREET ADDRESS STREET ADDRESS BELLEVIEW FL 34420 CITY-ST-ZIP CITY-ST-ZIP X Change TITLE ☐ Delete TITLE -☐ Addition V.P. SECOND

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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.

NAME

STREET ADDRESS

CITY-ST-ZIP

HASKLER, VERNON

9701 E HWY 25 #116

BELLÉVIEW FL 34420

NAME

STREET ADDRESS

CITY-ST-7IP

SIGNATURE: Signature and types of points of the Dolares H. OSTRAND 1-25-06 352-245-1479