

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N25302

FILED
May 09, 2004
Secretary of State

Entity Name: SCOTTSWOOD EAST HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

4406 SELKIRK LANE EAST
LAKELAND, FL 33813

New Principal Place of Business:

4415 SELKIRK LANE EAST
LAKELAND, FL 33813

Current Mailing Address:

4406 SELKIRK LANE EAST
LAKELAND, FL 33813

New Mailing Address:

4415 SELKIRK LANE EAST
LAKELAND, FL 33813

FEI Number: 59-2752331

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

RUDDEN, PATRICIA TREASUR
4406 SELKIRK LANE EAST
LAKELAND, FL 33813 US

Name and Address of New Registered Agent:

COURTNEY, JON TREASUR
4415 SELKIRK LANE EAST
LAKELAND, FL 33813 US

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: JON L. COURTNEY

05/09/2004

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MICKLEWRIGHT, DONALD
Address: 2015 CHARNES COURT
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: COURTNEY, JON
Address: 4415 SELKIRK LANE EAST
City-St-Zip: LAKELAND, FL 33813

Title: D () Delete
Name: RUDDEN, PATRICIA
Address: 4406 SELKIRK LANE EAST
City-St-Zip: LAKELAND, FL 33813

Title: D (X) Delete
Name: HAYES, CHARLOTTE
Address: 2034 ROXBURGH LANE
City-St-Zip: LAKELAND, FL 33813

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: D (X) Change () Addition
Name: ANDERSON, PHILLIP
Address: 4419 SELKIRK LANE EAST
City-St-Zip: LAKELAND, FL 33813

Title: D (X) Change () Addition
Name: HAYES, CHARLOTTE
Address: 2034 ROXBURGH LANE
City-St-Zip: LAKELAND, FL 33813

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: JON L. COURTNEY

TRES

05/09/2004

Electronic Signature of Signing Officer or Director

Date