

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 11, 2007 8:00 am
Secretary of State

01-11-2007 90050 047 ****61.25

DOCUMENT # N25390

1. Entity Name
**EAGLE'S LANDING OF WINTER HAVEN HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business
**EAGLES LANDING
WINTER HAVEN, FL 33881 US**

Mailing Address
**P.O. BOX 227
LAKE ALFRED, FL 33850 US**

40001378



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

01052007 Chg-NP CR2E037 (12/06)

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**TATELMAN, VICTOR
208 AVIATION DR
WINTER HAVEN, FL 33881**

Name

Street Address (P.O. Box Number is Not Acceptable)

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

**Filing Fee is \$61.25
Due by May 1, 2007**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME MAYNARD, WILLIAM
STREET ADDRESS 12 PILOT PL
CITY-ST-ZIP WINTER HAVEN, FL 33881

TITLE PD ☐ Delete
NAME TATELMAN, VICTOR
STREET ADDRESS 208 AVIATION DR
CITY-ST-ZIP WINTER HAVEN, FL 33881

TITLE SD ☐ Delete
NAME CHASE, ROBERT
STREET ADDRESS 10 PILOT PL
CITY-ST-ZIP WINTER HAVEN, FL 33881

TITLE D ☐ Delete
NAME CHARCHIAN, LARRY
STREET ADDRESS 23 AVIATION DR
CITY-ST-ZIP WINTER HAVEN, FL 33881

TITLE D ☐ Delete
NAME BROWN, LORI
STREET ADDRESS 11 AVIATION DR
CITY-ST-ZIP WINTER HAVEN, FL 33881

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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

SIGNATURE:

Victor Tatelman VICTOR TATELMAN
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/8/07 (803) 293-9006
Date Daytime Phone #