

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 23, 2007 8:00 am**  
**Secretary of State**

04-23-2007 90081 014 \*\*\*\*61.25

<b>DOCUMENT # N25726</b> 1. Entity Name <b>MOTE RANCH HOMEOWNERS' ASSOCIATION, INC.</b>					
Principal Place of Business <b>2831 RINGLING BLVD</b> <b>218-F</b> <b>SARASOTA, FL 34237 US</b>			Mailing Address <b>2831 RINGLING BLVD</b> <b>218-F</b> <b>SARASOTA, FL 34237 US</b>		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number <b>65-0104828</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent <b>ALL FLORIDA SERVICES</b> <b>2831 RINGLING BLVD</b> <b>218-F</b> <b>SARASOTA, FL 34232</b>				7. Name and Address of New Registered Agent Name <b>Magill, Lisa A, Esq</b> Street Address (P.O. Box Number is Not Acceptable) <b>Becker + Poliakoff, P.A.</b> <b>3111 Stirling Rd</b> City <b>Ft. Lauderdale</b> <b>FL</b> Zip Code <b>33312</b>	
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				DATE <b>4/20/07</b>	
Filing Fee is \$61.25 Due by May 1, 2007				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	
\$5.00 May Be Added to Fees				Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P GARBER, K 2831 RINGLING BLVD STE 218F SARASOTA, FL 34237	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P Garber, Ken 6160 Palomino Circle University Park, FL 34201	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD WEIR, JAMES 2831 RINGLING BLVD STE 218F SARASOTA, FL 34237	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Curren, Wayne 6916 Ranch Road Sarasota, FL 34243	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD SILVERSTEIN, NORMAN 2831 RINGLING BLVD STE 218F SARASOTA, FL 34237	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Silverstein, Norm 6815 Wagon Wheel Cir. Sarasota, FL 34243	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S HIRSCH, B 2831 RINGLING BLVD, 218 F SARASOTA, FL 34237	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Duren, Mark 6670 Copper Ridge Trail University Park, FL 34201	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Weir, James 6924 Ranch Road Sarasota, FL 34243	<input type="checkbox"/> Delete X change	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Brown, Linda 6659 Copper Ridge Trail University Park, 34201	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Hoffman, Roger 6002 Saddlehorn Ave. Sarasota, FL 34243	<input type="checkbox"/> Delete X change X Addition	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AS Michael Manning 1877 Northgate Blvd #4 Sarasota, FL 34234	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
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:				DATE <b>4-16-07</b>	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Daytime Phone #	