

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 20, 2005 8:00 am
Secretary of State

04-20-2005 90335 036 ****61.25

DOCUMENT # N29312 1. Entity Name SADDLE CLUB ESTATES PROPERTY OWNERS' ASSOCIATION, INC.																																																																																									
Principal Place of Business 240 POMMEL DRIVE 4150 Saddle Club Dr. NEW SMYRNA BEACH FL 32168				Mailing Address P.O. BOX 2821 NEW SMYRNA BEACH FL 32170 US																																																																																					
2. Principal Place of Business 4150 Saddle Club Drive Suite, Apt. #, etc.		3. Mailing Address PO BOX 2821 Suite, Apt. #, etc.																																																																																							
City & State New Smyrna Beach FL Zip 32168		City & State New Smyrna Beach FL Zip 32170		4. FEI Number 59-2945958 Applied For <input type="checkbox"/> Not Applicable																																																																																					
Country USA		Country USA		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required																																																																																					
6. Name and Address of Current Registered Agent KANALAS, JOHN J Daren McIntyre 240 POMMEL DRIVE 4150 Saddle Club Drive NEW SMYRNA BEACH FL 32168				7. Name and Address of New Registered Agent Name Daren McIntyre Street Address (P.O. Box Number is Not Acceptable) 4150 Saddle Club Drive City New Smyrna Beach FL Zip Code 32168																																																																																					
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 <u>D. McCL</u> <small>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE</small>																																																																																									
FILE NOW: FEE IS \$61.25 Due By May 1, 2005		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																																																																																					
<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> 10. OFFICERS AND DIRECTORS <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>T. Seibert</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>GIEBERT, TANA</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>4150 SADDLE CLUB DR. NEW SMYRNA BEACH FL 32168</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 10%; text-align: center;"><input checked="" type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>KANALAS, JOHN J</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>240 POMMEL DRIVE</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW SMYRNA BEACH FL 32168</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>HALL, RICHARD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>230 HAGRAMORE DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW SMYRNA BEACH FL 32168</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>SMITH, CHERI A</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4170 SADDLE CLUB DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW SMYRNA BEACH FL 32168</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>DIXON, JOHN D</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4140 SADDLE CLUB DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW SMYRNA BEACH FL 32168</td> <td></td> </tr> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Delete</td> </tr> <tr> <td>NAME</td> <td>MEREDTH, DARRELL M</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4035 SADDLE CLUB DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>NEW SMYRNA BEACH FL 32168</td> <td></td> </tr> </table> </div> <div style="width: 48%;"> 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width: 15%;">TITLE</td> <td style="width: 55%;">NAME</td> <td style="width: 10%; text-align: center;"><input type="checkbox"/> Change <input type="checkbox"/> Addition</td> </tr> <tr> <td>NAME</td> <td>P Daren McIntyre</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>4150 Saddle Club Drive</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>New Smyrna Beach FL 32168</td> <td></td> </tr> </table> </div> </div>						TITLE	NAME	<input type="checkbox"/> Delete	NAME	T. Seibert		STREET ADDRESS	GIEBERT, TANA		CITY-ST-ZIP	4150 SADDLE CLUB DR. NEW SMYRNA BEACH FL 32168		TITLE	NAME	<input checked="" type="checkbox"/> Delete	NAME	KANALAS, JOHN J		STREET ADDRESS	240 POMMEL DRIVE		CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168		TITLE	NAME	<input type="checkbox"/> Delete	NAME	HALL, RICHARD		STREET ADDRESS	230 HAGRAMORE DR		CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168		TITLE	NAME	<input type="checkbox"/> Delete	NAME	SMITH, CHERI A		STREET ADDRESS	4170 SADDLE CLUB DR		CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168		TITLE	NAME	<input type="checkbox"/> Delete	NAME	DIXON, JOHN D		STREET ADDRESS	4140 SADDLE CLUB DR		CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168		TITLE	NAME	<input type="checkbox"/> Delete	NAME	MEREDTH, DARRELL M		STREET ADDRESS	4035 SADDLE CLUB DR		CITY-ST-ZIP	NEW SMYRNA BEACH FL 32168		TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	NAME	P Daren McIntyre		STREET ADDRESS	4150 Saddle Club Drive		CITY-ST-ZIP	New Smyrna Beach FL 32168	
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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.																																																																																									
SIGNATURE: <u>D. McCL</u> Daren McIntyre <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>																																																																																									