

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2005 8:00 am
Secretary of State

02-24-2005 90032 025 ****70.00

DOCUMENT # N30343 1. Entity Name EAGLE PRESERVE COMMUNITY ASSOCIATION, INC.					
Principal Place of Business 9690 EAGLE PRESERVE DRIVE ENGLEWOOD, FL 34224 US			Mailing Address 9690 EAGLE PRESERVE DRIVE ENGLEWOOD, FL 34224 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		01032005 Chg-NP CR2E037 (10/03)	
Zip		Country		4. FEI Number 65-0208695	
				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	
STRODE, WILLIAM C 720 S. ORANGE AVE. SARASOTA, FL 34236				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 \$81.25 Due by May 1, 2005		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				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	P	☐ Delete		TITLE	D, T
NAME	FATUM, JOHN H			NAME	☒ Change ☐ Addition
STREET ADDRESS	9911 EAGLE PRESERVE DRIVE			STREET ADDRESS	
CITY-ST-ZIP	PLACIDA, FL 33946			CITY-ST-ZIP	
TITLE	PD	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	STANWIX, JOHN			NAME	
STREET ADDRESS	9711 EAGLE PRESERVE DR.			STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD, FL 34224			CITY-ST-ZIP	
TITLE	D	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	HODSON, PETER			NAME	
STREET ADDRESS	9600 EAGLE PRESERVE DR.			STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD, FL 34224			CITY-ST-ZIP	
TITLE	SD	☒ Delete		TITLE	SD
NAME	CRAMER, MARK			NAME	☐ Change ☒ Addition
STREET ADDRESS	9891 EAGLE PRESERVE DRIVE			STREET ADDRESS	THOMAS DROLET
CITY-ST-ZIP	ENGLEWOOD, FL 34224			CITY-ST-ZIP	4751 EAGLE PRESERVE DRIVE
TITLE	DVP	☐ Delete		TITLE	☐ Change ☐ Addition
NAME	SWARTZ, RICK			NAME	
STREET ADDRESS	P.O. BOX 397, 10051 EAGLE PRESERVE D.			STREET ADDRESS	
CITY-ST-ZIP	PLACIDA, FL 33946			CITY-ST-ZIP	
TITLE	TD	☒ Delete		TITLE	☐ Change ☐ Addition
NAME	CURTIS, DOUG			NAME	
STREET ADDRESS	9881 EAGLE PRESERVE DRIVE			STREET ADDRESS	
CITY-ST-ZIP	ENGLEWOOD, FL 34224			CITY-ST-ZIP	
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: _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR				Date Feb 18, 2005 Daytime Phone # 828-10132	