2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Apr 25, 2005 8:00 am Secretary of State

DOCUMENT # N31715 1. Entity Name SOUTHWOOD HOMEOWNERS' ASSOCIATION, INC.					02	4-25-2005 9029	4 024 ****6	1.25
6201 S. KAI Stuart, FL	34997	PO BOX 65	C/O ADVANTAGE PROPERTY MGT					UJE 61 (68)
Principal Place of Business 3. Mailing Address 1111, 55 Feb.				duni		 		
Suite, Apt	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			g-NP CR2	E037 (10/03)	
City & State		City & Spate			4. FEI Number 59-1777670			pplied For
Zip-	_ Country	Zip 94904	Country		5. Certificate of Sta		_ \$8.75,Ad	
	6. Name and Address of Current	Registered Agent		<u></u>	7. Name and Addr	ess of New Register	Fee Require ed Agent	90
FORTE, L	ORRAINE H		Ni	me				
1874 NË I	BUSINESS PARK PL BEACH, FL 34957	St	Street Address (P.O. Box Number is Not Acceptable)					
				SU	11te 100	, _		
			Ci	y A	VAPT	F	FL Zip Coo	1994
8. The above the obliga	e named entity submits this statement for tions of registered agent.	or the purpose of changing	its registered of	ice or registere	ed agent, or both, in t	he State of Florida. I	am familiar with,	and accept
SIGNATURE	Signature, typed of printed name of registered agent	and title if applicable. (I	NOTE: Registered Ager	t signature required	when reinstating)	A DA	3/05	·
•	Filing Fee is \$61.25 Due by May 1, 2005		Campaign Finand Contribution.	` —	\$5.00 May Be Added to Fees		eck payable t	
1 10.	OFFICERS AND DI	RECTORS	11.			S TO OFFICERS AND	DIRECTORS IN	l 10
TITLE NAME	TD TURCOTTE, LANCE	Delete	titl <u>e</u> Name		challe me			Addition
STREET ADDRESS CITY-ST-ZIP	6103 SE BLACK OAK LANE STUART, FL 34997	,	STREET ADD	RESS 55	56 S.E. 7	MeAdow U L34997	JAG	į
TITLE	VPSD	Delete	TITLE	- سرا	U TURL 1 / /	~ 3477/	hange	Addition
NAME STREET ADDRESS	DODGE, KRISTY 342 SE SOUTHWOOD TRAIL		NAME STREET ADO	DECC			•,	
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZI					
TITLE	D MCCDEA TRACI	☐ Delete	TITLE	PD	-	-	- Change	- Addition -
NAME STREET ADDRESS	MCCREA, TRACI 544 SE MEADOW WOOD WAY		NAME STREET ADD	RESS			,	
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZI	·				
TITLE NAME	TD SIMONE, VITO	Delete	TITLE NAME				☐ Change	☐ Addition
STREET ADDRESS	354 SE SOUTHWOOD TR.		STREET ADD	ress				!
CITY-ST-ZIP	STUART, FL 34997		CITY-ST-ZI					
TITLE NAME	MOORE, VERNE	Delete	TITLE NAME				Change	☐ Addition
STREET ADDRESS	708 SE PIN OAK TERRACE		STREET ADD	- 1				
CITY-ST-ZIP	STUART, FL 34997	☐ Delete	CITY+\$T-ZI	00	\	,	Change	Addition
NAME		L.1 Delete	NAME	FA	VUZZA, I	hubod Th	Change	Addition
STREET ADDRESS CITY-ST-ZIP			STREET ADD	1.70	se court	114000 M	716	
12. I hereby	Lending that the information supplied with	this filing does not qualify	for the exemption	n stated in Sec	ction 119.07(3/fi) Flor	2777/ ida Statutes, I further	certify that the in	nformation
indicated of the co	on this report or supplemental report is rporation or the receiver or trustee emp	s true and accurate and the owered to execute this rep	at my signature s ort as required b	hall have the s	ame legal effect as if	made under oath: tha	t I am an officer	or director
changed	or on an attachment with an address,	with all other like empower	u u.		u /_	1		
SIGNATURE: SIGNATURE: Date OF SIGNING OFFICER OR DIRECTOR Date Date Dayline Prone #								