


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 27, 2006 08:00 AM**  
**Secretary of State**

<b>DOCUMENT # N33845</b> 1. Entity Name <b>EASTON HOMEOWNERS' ASSOCIATION OF TALLAHASSEE, INC.</b>	
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Principal Place of Business 5432 PINDERTON WAY TALLAHASSEE, FL 32317 US	Mailing Address 5432 PINDERTON WAY TALLAHASSEE, FL 32317 US
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01192006 No Chg-NP CR2E037 (11/05)

**DO NOT WRITE IN THIS SPACE**

4. FEI Number <b>59-3025458</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required

**6. Name and Address of Current Registered Agent**

DULEY, RICHARD  
5432 PINDERTON WAY  
TALLAHASSEE, FL 32317

**DO NOT WRITE  
IN THIS SPACE**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-registering) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2006**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD CHOWN, CRAIG 5415 ASHTON CT TALLAHASSEE, FL 32317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD DULEY, RICHARD 5432 PINDERTON WAY TALLAHASSEE, FL 32317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SIRIANNI, GEORGE 5402 ASHTON COURT TALLAHASSEE, FL 32317
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

U00000403708  
02/06/06-80018-001 61.25

**DO NOT WRITE  
IN THIS SPACE**

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 Richard Duley for RICHARD DULEY / 1/25/06 850-878-7007

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date Daytime Phone #