

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N35190

FILED
Mar 24, 2006
Secretary of State

Entity Name: PLEASANT OAKS ESTATES HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

POST OFFICE BOX 544
ELLENTON, FL 34222

New Principal Place of Business:

Current Mailing Address:

POST OFFICE BOX 544
ELLENTON, FL 34222

New Mailing Address:

FEI Number: 65-0158272

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

TOLOMEO, SHERI L
3006 95TH DR EAST
PARRISH, FL 34219 US

Name and Address of New Registered Agent:

WESENBERG, SANDY
3006 95TH DR EAST
PARRISH, FL 34219 US

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.

SIGNATURE: SANDRA WESENBERG

03/24/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: BM () Delete
Name: WESENBERG, SANDY
Address: 3021 95 DRIVE E
City-St-Zip: PARRISH, FL 34219

Title: ST () Delete
Name: TOLOMEO, SHERI L
Address: 3006 95TH DR EAST
City-St-Zip: PARRISH, FL 34219

Title: BM () Delete
Name: ASHBURY, URSULA
Address: 9409 32ND COURT EAST
City-St-Zip: PARRISH, FL 34219

Title: VP () Delete
Name: WILSON, JEFF
Address: 3102 95 DR E
City-St-Zip: PARRISH, FL 34219

Title: P () Delete
Name: ARNO, DAVID
Address: 3017 95 DRIVE E
City-St-Zip: PARRISH, FL 34219

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ST (X) Change () Addition
Name: WESENBERG, SANDY
Address: 3021 95 DRIVE E
City-St-Zip: PARRISH, FL 34219

Title: ST (X) Change () Addition
Name: WESENBERG, SANDY L
Address: 3006 95TH DR EAST
City-St-Zip: PARRISH, FL 34219

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SANDRA WESENBERG

ST

03/24/2006

Electronic Signature of Signing Officer or Director

Date