2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2004
Secretary of State

DOCUMENT# N35374

Entity Name: GLEN OAKS HOMEOWNERS ASSOCIATION OF HILLSBOROUGH COUNTY, INC.

Current Principal Place of Business:

THE PROPERTY GRP OF CENTRAL FLORIDA
2595 TAMPA RD- STE H
PALM HARBOR, FL 34684 US

New Principal Place of Business:

Current Mailing Address:

THE PROPERTY GRP OF CENTRAL FLORIDA
2595 TAMPA RD- STE H
PALM HARBOR, FL 34684 US

New Mailing Address:

FEI Number: 59-2993569 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

SLEMENT, LEIGH
PROPERTY GROUP OF CENTRAL FLORIDA, INC.
2395 TAMPA ROAD, SUITE H
PALM HARBOR, FL 34684 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: CARD, ALVIN F JR.
Address: 11134 WINDPOINT DRIVE
City-St-Zip: TAMPA, FL

Title: D ( ) Delete
Name: TAYLOR, LESLIE A
Address: 8750 HUNTFIELD STREET
City-St-Zip: TAMPA, FL 33635

Title: SD ( ) Delete
Name: DINELLA, JEAN
Address: 8616 HUNTFIRLD STREET
City-St-Zip: TAMPA, FL 33635

Title: TD (X) Delete
Name: WHALLEN, PETRINA
Address: 8625 HUNTFIELD STREET
City-St-Zip: TAMPA, FL 33635

Title: VD (X) Delete
Name: BRESCIA, ADAM
Address: 11112 WINDPOINTE DRIVE
City-St-Zip: TAMPA, FL 33635

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change ( ) Addition
Name: ROY, CHRISTOPHER
Address: 2595 TAMPA ROAD, SUITE H
City-St-Zip: PALM HARBOR, FL 34684

Title: DS (X) Change ( ) Addition
Name: DINELLA, JEAN
Address: 2595 TAMPA ROAD, SUITE H
City-St-Zip: PALM HARBOR, FL 34684

Title: DT (X) Change ( ) Addition
Name: CANNON, CHARLES
Address: 2595 TAMPA ROAD, SUITE H
City-St-Zip: PALM HARBOR, FL 34684

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 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 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: CHRISTOPHER ROY DP 04/29/2004

Electronic Signature of Signing Officer or Director — Date