

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N36590

FILED
Feb 27, 2005
Secretary of State

Entity Name: THE SPICEWOOD HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

820 LAKE KATHRYN CIR
CASSEKBERRY, FL 32707 US

New Principal Place of Business:

1736 CINNAMON CIRCLE
CASSELBERRY, FL 32707 US

Current Mailing Address:

820 LAKE KATHRYN CIR
CASSEKBERRY, FL 32707 US

New Mailing Address:

1736 CINNAMON CIRCLE
CASSELBERRY, FL 32707 US

FEI Number: 59-2869952

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

CROWDER, DAVID
1712 CINNAMON CIRCLE
CASSELBERRY, FL 32707 US

Name and Address of New Registered Agent:

HOISINGTON, LIN
1736 CINNAMON CIRCLE
CASSELBERRY, FL 32707 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: LIN HOISINGTON

02/27/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: CROWDER, DAVE
Address: 1712 CINNAMON CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: YADLOCZKY, STEVE
Address: 1744 CINNAMON
City-St-Zip: CASSELBERRY, FL 32707

Title: D () Delete
Name: HARDEN, KATHY
Address: 1664 SPIREWOOD LONG
City-St-Zip: CASSELBERRY, FL 32707

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: HOISINGTON, LIN
Address: 1736 CINNAMON CIRCLE
City-St-Zip: CASSELBERRY, FL 32707

Title: D (X) Change () Addition
Name: LEVINE, BETSY
Address: 1696 SPICEWOOD LANE
City-St-Zip: CASSELBERRY, FL 32707

Title: D (X) Change () Addition
Name: EGGERICHS, KATHY
Address: 1664 SPICEWOOD LANE
City-St-Zip: CASSELBERRY, FL 32707

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: LIN HOISINGTON

TREA

02/27/2005

Electronic Signature of Signing Officer or Director

Date