

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N39613

FILED
Aug 09, 2005
Secretary of State

Entity Name: ABERDEEN ON GLEN HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

C/O DONNA SCHMIDT
611 SOUTH GLEN AVENUE
TAMPA, FL 33609

New Principal Place of Business:

C/O STEFAN MUECKE
615 S GLEN AVENUE
TAMPA, FL 33609

Current Mailing Address:

C/O DONNA SCHMIDT
611 SOUTH GLEN AVENUE
TAMPA, FL 33609

New Mailing Address:

C/O STEFAN MUECKE
615 S GLEN AVENUE
TAMPA, FL 33609

FEI Number: 59-3023857 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SCHMIDT, DONNA
611 S GLEN AVE
TAMPA, FL 33609 US

Name and Address of New Registered Agent:

MUECKE, STEFAN
615 S GLEN AVE
TAMPA, FL 33609 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: STEFAN MUECKE

08/09/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DT () Delete
Name: RILEY, KRISTIN/ STEVE
Address: 617 S GLEN AVE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: GONZALEZ, ALICIA
Address: 615 S GLEN AVE
City-St-Zip: TAMPA, FL

Title: D () Delete
Name: RABINOWITZ, AIME,
Address: 613 S GLEN AVE
City-St-Zip: TAMPA, FL

Title: DPTS () Delete
Name: SCHMIDT, DONNA J
Address: 611 SOUTH GLEN AVENUE
City-St-Zip: TAMPA, FL 33609

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: WHITEHEAD, JENNIFER
Address: 617 S GLEN AVE
City-St-Zip: TAMPA, FL

Title: DPT (X) Change () Addition
Name: MUECKE, STEFAN
Address: 615 S GLEN AVE
City-St-Zip: TAMPA, FL

Title: D (X) Change () Addition
Name: ANTMAN, AIME
Address: 613 S GLEN AVE
City-St-Zip: TAMPA, FL

Title: DS (X) Change () Addition
Name: KATSACOS, ELIZABETH
Address: 611 S GLEN AVENUE
City-St-Zip: TAMPA, FL 33609

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: STEFAN MUECKE

DPT

08/09/2005

Electronic Signature of Signing Officer or Director

Date