


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 11, 2005 8:00 am
Secretary of State

03-11-2005 90298 041 ****61.25

DOCUMENT # N41872	
1. Entity Name	
SWAN LAKE OF TITUSVILLE HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business	Mailing Address
3514 IBIS ST TITUSVILLE FL 32796 US	3514 IBIS ST TITUSVILLE FL 32796 US



2. Principal Place of Business	3. Mailing Address
3517 SWAN LAKE DR.	3517 SWAN LAKE DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

1st MOORE CR2E037 (10/04)

City & State	City & State
TITUSVILLE, FL.	TITUSVILLE, FL.
Zip	Zip
32796	32796
Country	Country
US	US

4. FEI Number	Applied For
59-3070115	Not Applicable

5. Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent
SCHERER, HENRY 3530 SWAN LAKE DR. TITUSVILLE FL 32796

7. Name and Address of New Registered Agent
Name
Street Address (P.O. Box Number is Not Acceptable)
City
FL
Zip Code

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 <i>Henry W. Scherer</i> HENRY W. SCHERER	3/8/05
<small>Signature, typed or printed name of registered agent and title if applicable</small>	<small>(NOTE: Registered Agent signature required when reinstating) DATE</small>

FILE NOW: FEE IS \$61.25 Due By May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE	NAME	TITLE	NAME
P	SCHERER, HENRY	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	3530 SWAN LAKE DR.	STREET ADDRESS	
CITY-ST-ZIP	TITUSVILLE FL 32796	CITY-ST-ZIP	
<input type="checkbox"/> Delete			
TITLE	NAME	TITLE	NAME
VP	MEDEIROS, CHARLOTTE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	3473 PELICAN CIR	STREET ADDRESS	THOMAS HENRY
CITY-ST-ZIP	TITUSVILLE FL 32796	CITY-ST-ZIP	1532 SEA GULL DR.
<input checked="" type="checkbox"/> Delete			TITUSVILLE, FL. 32796
TITLE	NAME	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
F	WEINERT, RUSSELL H	STREET ADDRESS	
STREET ADDRESS	1544 SEA GULL DR.	CITY-ST-ZIP	
CITY-ST-ZIP	TITUSVILLE FL 32796		
<input type="checkbox"/> Delete			
TITLE	NAME	TITLE	NAME
SD	BOGER, NORMA	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	3453 PELICAN CIR	STREET ADDRESS	RUTH HELLMERS
CITY-ST-ZIP	TITUSVILLE FL 32796	CITY-ST-ZIP	1566 SEA GULL DR.
<input checked="" type="checkbox"/> Delete			TITUSVILLE FL, 32796
TITLE	NAME	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
MD	NITCHELL, JACK	STREET ADDRESS	
STREET ADDRESS	1540 SEA GULL DR	CITY-ST-ZIP	
CITY-ST-ZIP	TITUSVILLE FL 32796		
<input checked="" type="checkbox"/> Delete			
TITLE	NAME	TITLE	NAME
S	HAMELIN, KATHY	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
STREET ADDRESS	1510 SEA GULL DR.	STREET ADDRESS	CATHY FLICK
CITY-ST-ZIP	TITUSVILLE FL 32796	CITY-ST-ZIP	1567 SEA GULL DR.
<input checked="" type="checkbox"/> Delete			TITUSVILLE FL. 32796

12. I hereby certify that the information supplied with this filing does not qualify 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 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 <i>Henry W. Scherer</i> HENRY W. SCHERER	3/8/2005 (321) 383-0940
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>	<small>Date Daytime Phone #</small>