

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N42226

FILED
May 08, 2005
Secretary of State

Entity Name: THE SARATOGA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

32140 DEWBERRY LN
SORRENTO, FL 32776

New Principal Place of Business:

32031 DEWBERRY LN
SORRENTO, FL 32776

Current Mailing Address:

32140 DEWBERRY LN
SORRENTO, FL 32776

New Mailing Address:

32031 DEWBERRY LN
SORRENTO, FL 32776

FEI Number: **FEI Number Applied For ()** **FEI Number Not Applicable (X)** **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:

BROWN, THOMAS
32140 DEWBERRY LANE
SORRENTO, FL 32776 US

Name and Address of New Registered Agent:

DAVIS, SPENCER D
32031 DEWBERRY LANE
SORRENTO, FL 32776 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: SPENCER D DAVIS

05/08/2005

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: BROWN, THOMAS
Address: 32140 DEWBERRY LANE
City-St-Zip: SORRENTO, FL 32776

Title: SD () Delete
Name: DALEY, JANICE
Address: 32111 DEWBERRY LANE
City-St-Zip: SORRENTO, FL 32776

Title: VD () Delete
Name: BROWN, BEVERLY
Address: 32140 DEWBERRY LANE
City-St-Zip: SORRENTO, FL 32776

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: DAVIS, SPENCER D
Address: 32031 DEWBERRY LANE
City-St-Zip: SORRENTO, FL 32776

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

Title: VD (X) Change () Addition
Name: DAVIS, MAUREEN
Address: 32031 DEWBERRY LANE
City-St-Zip: SORRENTO, FL 32776

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: SPENCER D DAVIS

PD

05/08/2005

Electronic Signature of Signing Officer or Director

Date