2003 UNIFORM BUSINESS REPORT (UBR)

DOCUMENT# N42226

FILED Apr 17, 2003 Secretary of State

Entity Name: THE SARATOGA HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Place of Business:		
32140 DEV	VBERRY LN O, FL 32776				
Current Mailing Address:			New Mailing Address:		
	VBERRY LN O, FL 32776				
FEI Number: FEI Number Applied For ()		FEI Number Not Applicable (X)		Certificate of Status Desired ()	
Name and	Address of Cu	rrent Registered Agent:	Name and	Address o	f New Registered Agent:
	THOMAS VBERRY LANE O, FL 32776	US			
The above in the State		bmits this statement for the p	ourpose of changing i	ts registered	d office or registered agent, or both,
SIGNATUR	RE:				
Electronic Signature of Registered Age			ent Date		
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	PD () D BROWN, THOMAS 32140 DEWBERF SORRENTO, FL	S Y LANE	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	SD () D DALEY, JANICE 32111 DEWBERF SORRENTO, FL	Y LANE	Title: Name: Address: City-St-Zip:		() Change () Addition
Title: Name: Address: City-St-Zip:	VD () D RAHMANN, ROBE 32030 DEWBERF SORRENTO, FL	RT Y LANE	Title: Name: Address: City-St-Zip:	VD BROWN, BE 32140 DEW SORRENTO	BERRY LANE

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: THOMAS BROWN PD 04/17/2003