

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

FILED
Feb 01, 2005 8:00 am
Secretary of State

02-01-2005 90035 040 ****61.25

DOCUMENT # N42962
 1. Entity Name
PADRON'S WEST LINDEN ESTATES HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business Mailing Address
369 LORENZO DR. SPRING HILL FL 34609 **369 LORENZO DR. SPRING HILL FL 34609**

2. Principal Place of Business Suite, Apt. #, etc.
 3. Mailing Address Suite, Apt. #, etc.

City & State City & State
 Zip Country Zip Country



1st MOORE CR2E037 (10/04)

6. Name and Address of Current Registered Agent
CHANDLER, WILLIAM
369 LORENZO DR.
SPRING HILL FL 34609

4. FEI Number **59-3345051**
 Applied For Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW: FEE IS \$61.25
Due By May 1 2005

9. Election Campaign Financing Trust Fund Contribution. **\$5.00 May Be Added to Fees**

Make Check Payable to Florida Department of State

10. OFFICERS AND DIRECTORS

| | |
|---------------------------------------|--|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D SAWYER, HENRY 12084 SAPPHERE DR. SPRING HILL FL 34609 <input checked="" type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D PRAGANA, EDWARD 12214 PADRON BLVD SPRING HILL FL 34609 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | PD CHANDLER, WILLIAM 369 LORENZO DR SPRING HILL FL 34609 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | VD STARK, JOSEPH 12138 PADRON BLVD. SPRING HILL FL 34609 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D COVAR, LAWRENCE 12042 SAPPHERE DR SPRING HILL FL 34609 <input type="checkbox"/> Delete |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D MCGOWAN, THOMAS 12116 PADRON BLVD SPRING HILL FL 34609 <input type="checkbox"/> Delete |

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

| | |
|---------------------------------------|---|
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
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| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: *William L. Chandler* **William L. Chandler, President 1/24/05 (352) 684-1782**