## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N43870

FILED Apr 05, 2005 Secretary of State

Entity Name: DEVONSHIRE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:		
3974 TAMI B				3974 TAMPA ROAD SUITE B		
OLDSMAR	R, FL 34677	US		OLDSMAR, FL 34677	US	
Current Mailing Address:				New Mailing Address:		
THE MELROSE MGMT GROUP PO BOX 2157 OLDSMAR, FL 346772157 US				P.O. BOX 2157 OLDSMAR, FL 34677	US	
FEI Number:	: 59-3091227	FEI Number Applied For ( )	FEI Nur	mber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
HANSON, JACK B 3974 TAMPA ROAD B OLDSMAR, FL 34677 US				HANSON, JACK B 3974 TAMPA ROAD SUITE B OLDSMAR, FL 34677 US		
	named entity of Florida.	submits this statement for the	purpose o	of changing its registered	d office or registered agent, or both,	
SIGNATURE: JACK B HANSON					04/05/2005	
	Electro	nic Signature of Registered Ac	gent		Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:			
Title: Name: Address: City-St-Zip:	PD ( GARBACZ, JAI 4756 DEVONS PALM HARBOI	HIRE BLVD.		Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address:	SD ( SACONE, PHY 4696 DEVONS			Title: Name: Address:	( ) Change ( ) Addition	

Title: D
Name: REED. LOW

City-St-Zip:

City-St-Zip:

D ( ) Delete REED, LOWELL

PALM HARBOR, FL 34685

PALM HARBOR, FL 34685

Address: 4548 DEVONSHIRE BLVD City-St-Zip: PALM HARBOR, FL 34685

Title: VPD () Delete
Name: KUEMMEL, DONNA
Address: 3969 BRIGHTSIDE LANE

 Title:
 TD
 ( ) Delete

 Name:
 GRAY, CHRISTOPHER

 Address:
 4642 DEVONSHIRE BLVD

 City-St-Zip:
 PALM HARBOR, FL 34685

Address.

Address: City-St-Zip:

Title: VPD (X) Change ( ) Addition

Name: REED, LOWELL

Address: 4548 DEVONSHIRE BLVD City-St-Zip: PALM HARBOR, FL 34685

Name: KUEMMEL, DONNA Address: 3969 BRIGHTSIDE LANE City-St-Zip: PALM HARBOR, FL 34685

Title: D (X) Change ( ) Addition

Name: GRAY, CHRISTOPHER
Address: 4642 DEVONSHIRE BLVD
City-St-Zip: PALM HARBOR, FL 34685

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: JACK B HANSON AGEN 04/05/2005