


2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90127 042 ****61.25

DOCUMENT # N45279 1. Entity Name THE TORREYA HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 1704 KEELY LANE SARASOTA, FL 34232 US			Mailing Address 1704 KEELY LANE SARASOTA, FL 34232 US		
2. Principal Place of Business - No P.O. Box # 1625 KEELY LANE Suite, Apt. #, etc.		3. Mailing Address 1625 KEELY LANE Suite, Apt. #, etc.			
City & State SARASOTA FL Zip 34232 Country US		City & State SARASOTA FL Zip 34232 Country US		4. FEI Number 65-0334076	
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent SPANSKI, CHRISTINE 1704 KEELY LANE SARASOTA, FL 34232			7. Name and Address of New Registered Agent Name RICHARD JOHN Street Address (P.O. Box Number is Not Acceptable) 1625 KEELY LANE City SARASOTA FL Zip Code 34232		
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 <u><i>R/John</i></u> RICHARD JOHN - DIRECTOR/TREASURER DATE 3/27/07 <small>Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		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					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DP SHAPIRO, RICHARD 1687 EAGLE NEST COURT SARASOTA, FL 34232	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT SPANSKI, CHRISTINE 1704 KEELY LANE SARASOTA, FL 34232	<input checked="" type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS RUBIN, DAVID 1674 KEELY LANE SARASOTA, FL 34232	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DVP MCCABE, MARK 1620 KEELY LANE SARASOTA, FL 34232	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ROBIN, RICHARD 1625 KEELY LANE SARASOTA, FL 34232	<input type="checkbox"/> Delete			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT JOHN, RICHARD 1625 KEELY LANE SARASOTA FL 34232	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition			
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D ALICKMAN, BRENNER 1700 KEELY LANE SARASOTA FL 34232	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition			
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, 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: <u><i>R/John</i></u> RICHARD JOHN		3/27/07		94-34-0651	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>		<small>Daytime Phone #</small>	