

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N45401

FILED
Jul 08, 2006
Secretary of State

Entity Name: ROBBINS REST HOMEOWNERS ASSOCIATION, INCORPORATED

Current Principal Place of Business:

P.O. BOX 30
LOUGHMAN, FL 33858

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 30
LOUGHMAN, FL 33858

New Mailing Address:

FEI Number: 59-3084946 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **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:

FEATHERSTONE, JUDY
134 ROBBINS REST CT
DAVENPORT, FL 33896 US

Name and Address of New Registered Agent:

DORF, GREGORY A
354 ROBBINS REST CIR
DAVENPORT, FL 338965206 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: GREGORY A. DORF

07/08/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SNYDER, RALPH
Address: 133 ROBBINS REST COURT
City-St-Zip: DAVENPORT, FL 33896

Title: SD () Delete
Name: CHALLMAN, PAT
Address: 342 ROBBINS REST CIRCLE
City-St-Zip: DAVENPORT, FL 33896

Title: TD () Delete
Name: DORF, GREGORY
Address: 354 ROBBINS REST CIRCLE
City-St-Zip: DAVENPORT, FL 33837

Title: PD (X) Delete
Name: FEATHERSTONE, JUDY
Address: 134 ROBBINS REST COURT
City-St-Zip: DAVENPORT, FL 33896

Title: DARB (X) Delete
Name: ALEXANDER, MARC
Address: 115 ROBBINS REST COURT
City-St-Zip: DAVENPORT, FL 33896

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VD (X) Change () Addition
Name: ALEXANDER, MARC
Address: 115 ROBBINS REST COURT
City-St-Zip: DAVENPORT, FL 33896 US

Title: SD (X) Change () Addition
Name: MAYNARD, ANNE
Address: 221 ROBBINS REST CIRCLE
City-St-Zip: DAVENPORT, FL 33896 US

Title: TD (X) Change () Addition
Name: DORF, GREGORY
Address: 354 ROBBINS REST CIRCLE
City-St-Zip: DAVENPORT, FL 33896 US

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

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

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 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: GREGORY A. DORF

TD

07/08/2006

Electronic Signature of Signing Officer or Director

Date