2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jan 30, 2008 8:00 am
Secretary of State
01-30-2008 90037 035 ****61.25

DOCUMENT # N92000000740

1. Entity Name

STERLING PARK ESTATES HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
STERLING PARK HOA 1648 EMERALD GREEN COURT DELTONA FL 32725 US	STERLING PARK HOA 1648 EMERALD GREEN COURT DELTONA FL 32725 US
2. Principal Place of Business - No P.O. Box #	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

1st MOORE CR2E037 (10/07)

4. FEI Number 59-3177359 ☐ Applied For ☒ Not Applicable

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

6. Name and Address of Current Registered Agent

CARR, EMMET
1645 EMERALD GREEN COURT
DELTONA FL 32725

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 ______________________________
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2008

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	T	☐ Delete
NAME	CARR, EMMET	
STREET ADDRESS	1648 EMERALD GREEN CT	
CITY-ST-ZIP	DELTONA FL 32725	
TITLE	P	☐ Delete
NAME	BATEMAN, DELORES	
STREET ADDRESS	1667 STERLING SILVER BLVD.	
CITY-ST-ZIP	DELTONA FL 32725	
TITLE	S	☐ Delete
NAME	PREMO, LESLIE	
STREET ADDRESS	1098 PEARL TREE ROAD	
CITY-ST-ZIP	DELTONA FL 32725	
TITLE	D DUDLEY	☐ Delete
NAME	~~DVALEY~~, DANIEL	
STREET ADDRESS	1089 PEARL TREE ROAD	
CITY-ST-ZIP	DELTONA FL 32725	
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
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CITY-ST-ZIP		
TITLE		☐ Change ☐ Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Emmet Carr EMMET CARR 1-25-08 386-532-6725