

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 14, 2008 8:00 am**  
**Secretary of State**

02-14-2008 90026 006 \*\*\*\*61.25

DOCUMENT # N93000001244



1. Entity Name  
SOUTHCHASE PARCEL 2 COMMUNITY ASSOCIATION,  
INC.

Principal Place of Business  
C/O 2884 S. OSCEOLA AVE  
ORLANDO, FL 32806 US

Mailing Address  
C/O 2884 S. OSCEOLA AVE  
ORLANDO, FL 32806 US

2. Principal Place of Business - No P.O. Box #

c/o World of Homes  
Suite, Apt. #, etc.  
2884 S. Osceola Avenue  
City & State  
Orlando, FL

3. Mailing Address

c/o World of Homes  
Suite, Apt. #, etc.  
2884 S. Osceola Avenue  
City & State  
Orlando, FL

City & State

Orlando, FL

City & State

Orlando, FL

Zip

32806

Country

USA

Zip

32806

Country

USA

6. Name and Address of Current Registered Agent

WORLD, OF HOMES  
2884 S. OSCEOLA AVENUE  
ORLANDO, FL 32806

01072008

Chg-NP

CR2E037 (12/06)

4. FEI Number  
59-3180915

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)

C

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

Filing 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  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
VD  
DELGADO, ELEUTERIO  
2330 LAUREL PINE LANE  
ORLANDO, FL 32837 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
PTD  
BURLESON, ROBERTA  
12139 BELLSWORTH WAY  
ORLANDO, FL 32837 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
SD  
BAUS, MINNIE  
2229 LAUREL PINE LANE  
ORLANDO, FL 32837 ☒ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP  
☐ Delete

TITLE  
NAME  
STREET ADDRESS  
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11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

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

TITLE  
NAME  
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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 legal empowered.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

*15*  
*2/4/08*  
Date

Daytime Phone #