2005 NOT-FOR-PROFIT CORPORATION

Aug 18, 2005 8:00 am Secretary of State ANNUAL REPORT **DOCUMENT # N94000001205** 08-18-2005 90003 008 ****61.25 RAMBLEWOOD VILLAGE HOMEOWNERS ASSOCIATION Principal Place of Business Mailing Address 38210 VINSON AVE 38210 VINSON AVE JUUDAAJJ ZEPHYRHILLS, FL 33542 ZEPHYRHILLS, FL 33542 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 08132005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number 59-3234955 Applied For Not Applicable Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent REYNOLDS, JAMES 38100 COVERED BRIDGE BLVD ZEPHYRHILLS, FL 33542 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 (NOTE: Registered Agent signature required when reinstating) 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Due by September 7, 2005 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 10. 11 TITLE **D**Oelete TITLE Addition Ann Guess 38012 Woodgate Zephyrhills, Fl 33542 REYNOLDS, JAMES NAME NAME 38100 COVERED BRIDGE BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP ZEPHYRHILLS, FL 33542 CITY-ST-ZIP VD TITLE ✓ Delete Change ☐ Addition Phyllis Field 38122 Covered Bridge Zephyrhills, FL. 33542 NAME DURBEN PAUL MAME STREET ADDRESS 38143 COVERED BRIDGE BLVD STREET ADDRESS CITY-ST-7P ZEPHYRHILLS, FL 33542 CITY-ST-7IP TITLE s ☐ Delete TITLE Change : ☐ Addition NAME **GUESS, ANN** STREET ADDRESS 38012 WOODGATE LANE STREET ADDRESS Zephyrhills FL CITY-ST-7IP ZEPHYRHILLS, FL 33542 CITY-ST-ZIP TITLE ☑ Delete TITLE ☐ Change ■ Addition Jeanette Kashuba 4329 Woodstock Blud NAME BENSLEY, WILLIAM NAME STREET ADDRESS 38138 WOODSIDE LANE STREET ADDRESS ZEPHYRHILLS, FL 33542 CITY-ST-7/P CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify 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 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 attachaptent with an address, with all other like empowered.

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE:

TITLE

NAME

STREET ADDRESS

C/TY-ST-7/P

axette Kashura NATURE AND TYPED OR PRINTED NAME OF SIGNI OFFICER OF DIRECTOR

Delete

☐ Addition

□ Change

FILED