

# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001773

FILED  
Apr 24, 2008  
Secretary of State

Entity Name: THREE SISTERS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

430 EAST RAILROAD AVE  
BOCA GRANDE, FL 33921 US

**New Principal Place of Business:**

**Current Mailing Address:**

P.O.BOX 216  
BOCA GRANDE, FL 33921 US

**New Mailing Address:**

FEI Number: 65-049584      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

PATERSON, REBECCA S  
430 EAST RAILROAD AVE.  
BOCA GRANDE, FL 33921 US

**Name and Address of New Registered Agent:**

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: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_ Date

**OFFICERS AND DIRECTORS:**

Title: DP ( ) Delete  
Name: PATERSON, REBECCA S  
Address: P.O BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

Title: DV ( ) Delete  
Name: DEATERLY, JEFF  
Address: P.O.BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

Title: DST ( ) Delete  
Name: JOHNSON, CHRIS  
Address: P.O.BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: DST (X) Change ( ) Addition  
Name: PATERSON, REBECCA S  
Address: P.O BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

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

Title: DP (X) Change ( ) Addition  
Name: JOHNSON, CHRIS  
Address: P.O.BOX 216  
City-St-Zip: BOCA GRANDE, FL 33921

I hereby certify that the information supplied with this filing does not qualify 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: REBECCA PATERSON

DST

04/24/2008

Electronic Signature of Signing Officer or Director

\_\_\_\_\_ Date