


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2004 8:00 am
Secretary of State

03-10-2004 90014 020 ****61.25

DOCUMENT # N94000001956 1. Entity Name THE ROBERTS SUBDIVISION HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business C/O WILLIAM R. KORP, ESQ. 240 S PINAPPLE AVE SARASOTA, FL 34236			Mailing Address C/O WILLIAM R. KORP, ESQ. PO BOX 49948 SARASOTA, FL 34230		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0563588	
5. Certificate of Status Desired <input type="checkbox"/>				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent KORP, WILLIAM R ESQ. 240 S PINEAPPLE AVE SARASOTA, FL 34236				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				DATE	
SIGNATURE <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE	
Filing Fee Is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	D ROBERTS, ISAAC B <input type="checkbox"/> Delete 331 ROBERTS ROAD NOKOMIS, FL 34275				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS, DOROTHY B <input type="checkbox"/> Delete 331 ROBERTS ROAD NOKOMIS, FL 34275				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS DE VANEY, DEBORAH L. <input type="checkbox"/> Delete 611 BRISTOL LANE NOKOMIS, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCKAY, MAGGIE <input type="checkbox"/> Delete 327 ROBERTY WAY NOKOMIS, FL 34275				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ROBERTS, MICHAEL B. <input type="checkbox"/> Delete 3505 PINETREE ROAD ORLANDO, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
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TITLE NAME STREET ADDRESS CITY-ST-ZIP <input type="checkbox"/> Change <input type="checkbox"/> Addition					
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 attachment with an address, with all other like empowered.					
SIGNATURE: Isaac B. Roberts President 3/8/04 941-488-6409 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

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