2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2005
Secretary of State

DOCUMENT# N94000005949

Entity Name: CASEY LAKE MANORS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

4419 CASEY LAKE BLVD
TAMPA, FL 33618 US

New Principal Place of Business:

Current Mailing Address:

4419 CASEY LAKE BLVD
TAMPA, FL 33618 US

New Mailing Address:

FEI Number: 59-3282195 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

JAMES, JUDITH L
325 SOUTH BLVD.
TAMPA, FL 33606 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: TD ( ) Delete
Name: SMITH, JENNIFER
Address: 4419 CASEY LAKE BLVD.
City-St-Zip: TAMPA, FL 33618

Title: PD ( ) Delete
Name: GIOVENCO, CARL
Address: 11506 SHIMMERING SHORE PLACE
City-St-Zip: TAMPA, FL 33618

Title: VPD ( ) Delete
Name: SCIORTINO, VINCE
Address: 11505 SHIMMERING SHORE PLACE
City-St-Zip: TAMPA, FL 33618

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

Title: PD (X) Change ( ) Addition
Name: LINDIN, JENNIFER
Address: 4402 ROUND LAKE COURT
City-St-Zip: TAMPA, FL 33618

Title: VPD (X) Change ( ) Addition
Name: SANTULLI-PLUMMER, LAURIE
Address: 4401 ROUND LAKE COURT
City-St-Zip: TAMPA, FL 33618

I hereby certify that the information supplied with this filing does not qualify for the 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 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: JENNIFER SMITH TD 04/29/2005

Electronic Signature of Signing Officer or Director — Date