

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000001551

FILED
Aug 13, 2007
Secretary of State

Entity Name: SENECA BEND HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

70 OAK BEND CT
OVIEDO, FL 32765 US

New Principal Place of Business:

55 OAK BEND CT
OVIEDO, FL 32765 US

Current Mailing Address:

70 OAK BEND CT
OVIEDO, FL 32765 US

New Mailing Address:

55 OAK BEND CT
OVIEDO, FL 32765 US

FEI Number: 59-3306289 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

PERSAMPIERE, ALBERT
70 OAK BEND CT
OVIEDO, FL 32765 US

Name and Address of New Registered Agent:

MASSIE, LEE
55 OAK BEND CT
OVIEDO, FL 32765 US

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: LEE MASSIE

08/13/2007

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: DVP () Delete
Name: MASSIE, JEFFERSON
Address: 55 OAK BEND CT
City-St-Zip: OVIEDO, FL 32765

Title: DP () Delete
Name: PERSAMPIERE, ALBERT
Address: 70 OAK BEND CT
City-St-Zip: OVIEDO, FL 32765

Title: DS () Delete
Name: PERSAMPIERE, CHRISTINE
Address: 70 OAK BEND CT.
City-St-Zip: OVIEDO, FL 32765

Title: DT (X) Delete
Name: WILEY, RENEE
Address: 30 OAK BEND CT.
City-St-Zip: OVIEDO, FL 32765

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: DP (X) Change () Addition
Name: MASSIE, JEFFERSON
Address: 55 OAK BEND CT
City-St-Zip: OVIEDO, FL 32765

Title: DVP (X) Change () Addition
Name: WILEY, RENEE
Address: 30 OAK BEND COURT
City-St-Zip: OVIEDO, FL 32765

Title: DT (X) Change () Addition
Name: DEEGAN, JOHN
Address: 145 OAK BEND COURT
City-St-Zip: OVIEDO, FL 32765

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

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: LEE MASSIE

DP

08/13/2007

Electronic Signature of Signing Officer or Director

Date