

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 16, 2006 08:00 AM
Secretary of State

DOCUMENT # N95000001736 1. Entity Name ROSEDALE 6-A HOMEOWNERS' ASSOCIATION, INC.					
Principal Place of Business 5100 87TH ST., E BRADENTON FL 34211 US			Mailing Address PO BOX 20521 BRADENTON FL 34204 US		
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 65-0577052	
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required				Applied For ☐ Not Applicable	
6. Name and Address of Current Registered Agent HARTMANN, ALBERT 5046 88TH ST E BRADENTON FL 34211				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.				FL Zip Code	
SIGNATURE <i>Edward C Schleg</i> Treasurer <i>2/14/06</i> Signature (typed or printed name of registered agent) and title of applicant (NOTE: Registered Agent signature required when re-registering)				FILE NOW: FEE IS \$61.25 Due By May 1, 2006	
9. Election Campaign Financing Trust Fund Contribution. ☐				\$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		PD HARTMAN, ALBERT 5046 88TH ST E BRADENTON FL 34211		☐ Delete	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		VPD REISER, ROBERT M 5105 88TH STREET EAST BRADENTON FL 34211		☐ Delete	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		SATD SYMONS, JAMES 4942 88TH ST E BRADENTON FL 34211		☐ Delete	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TD SCHLEG, EDWARD 4931 88TH STREET E BRADENTON FL 34211		☐ Delete	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		BM GOLDMAN, MITCHELL 4935 88TH ST E BRADENTON FL 34211		☐ Delete	
TITLE NAME STREET ADDRESS CITY- ST- ZIP		TITLE NAME STREET ADDRESS CITY- ST- ZIP		☐ Delete	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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 *Edward C Schleg* **Treasurer** *2/14/06* *251 2182*