


# 2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Feb 05, 2008 8:00 am**  
**Secretary of State**

02-05-2008 90006 016 \*\*\*\*61.25

<b>DOCUMENT # N95000001740</b> 1. Entity Name <b>ROSEDALE 6-B HOMEOWNERS' ASSOCIATION, INC.</b>					
Principal Place of Business <b>PO BOX 20363</b> <b>BRADENTON, FL 34204 US</b>			Mailing Address <b>PO BOX 20363</b> <b>BRADENTON, FL 34204 US</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>65-0577060</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent  <b>LASPERANCE, PAMELA</b> <b>8766 49TH TERR. E.</b> <b>BRADENTON, FL 34211</b>				7. Name and Address of New Registered Agent  Name  Street Address (P.O. Box Number is Not Acceptable)  City <div style="display: flex; justify-content: space-between;"> <span><b>FL</b></span> <span>Zip Code</span> </div>	
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.					
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25</b> <b>Due by May 1, 2008</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be</b> <b>Added to Fees</b>	
<b>Make check payable to</b> <b>Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>MURPHY, DENNIS J</b> <input checked="" type="checkbox"/> Delete <b>8762 49TH TERR. E.</b> <b>BRADENTON, FL 34211</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P <b>Washo, William</b> <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>6872 Uppingham Rd.</b> <b>Fayetteville, NC 28306</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <b>SLIFKA, ROBERT</b> <input type="checkbox"/> Delete <b>8705 49TH TERR E</b> <b>BRADENTON, FL 34211</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <b>WASHO, WILLIAM</b> <input checked="" type="checkbox"/> Delete <b>6872 UPPINGHAM RD</b> <b>FAYETTEVILLE, NC 28306</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T <b>Morton Hellwig</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>8754 49th Terrace E</b> <b>Bradenton, FL 34211</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>NAYLOR, MARY</b> <input checked="" type="checkbox"/> Delete <b>8717 49TH TERR. E.</b> <b>BRADENTON, FL 34211</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D <b>Christine Weakland</b> <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition <b>8742 49th Terrace E</b> <b>Bradenton FL 34211</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S <b>LESERANCE, PAMELA</b> <input type="checkbox"/> Delete <b>8766 49TH TERR. E.</b> <b>BRADENTON, FL 34211</b>		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		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 exemptions contained 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 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.					
<b>SIGNATURE:</b> <u>Pamela Lesperance</u> <u>Pamela Lesperance</u> <u>2/2/08</u> <u>941-727-</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

1562