

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N95000003185

FILED
Jan 18, 2005
Secretary of State

Entity Name: THE ARBORS HOMEOWNER'S ASSOCIATION, INC.

Current Principal Place of Business:

970 ARAGON AVE
WINTER PARK, FL 32789

New Principal Place of Business:

Current Mailing Address:

970 ARAGON AVE
WINTER PARK, FL 32789

New Mailing Address:

FEI Number: 59-3364028

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MATTAR, ROLF
970 ARAGON AVE
WINTER PARK, FL 32789 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: PD () Delete
Name: MATTAR, ROLF
Address: 970 ARAGON AVE
City-St-Zip: WINTER PARK, FL 32789

Title: TD () Delete
Name: KOON, KAREN P
Address: 972 ARAGON AVE
City-St-Zip: WINTER PARK, FL 32789

Title: VPD (X) Delete
Name: KILMER, SARAH
Address: 962 ARAGON AVENUE
City-St-Zip: WINTER PARK, FL 32789

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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: KAREN P. KOON

TD

01/18/2005

Electronic Signature of Signing Officer or Director

Date