

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
May 08, 2007 8:00 am
Secretary of State

05-08-2007 90012 039 ****61.25

DOCUMENT # N95000003386

1. Entity Name

EMERALD HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

101 BRETT STREET
DAVENPORT FL 33837

P.O. BOX 1074
DAVENPORT FL 33837



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

1st MOORE

CR2E037 (10/06)

4. FEI Number

65-0654611

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

RICHARDSON, ANN MARIE
119 JEREMY DRIVE
DAVENPORT FL 33837

Name Ralph Blevins
Street Address (P.O. Box Number is Not Acceptable)
501 Jeremy Drive

City Davenport FL Zip Code 33837

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

Ralph Blevins

Ralph Blevins - President

2-22-07

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Delete
NAME D
STREET ADDRESS ROBINSON, MARYANNE
CITY-ST-ZIP 106 KELLY CT
DAVENPORT FL 33837

TITLE ☐ Change ☒ Addition
NAME Chew Frank
STREET ADDRESS 138 Kelly Ct.
CITY-ST-ZIP Davenport FL 33837

TITLE ☐ Delete
NAME AKINS, BILL
STREET ADDRESS 643 JEREMY DR
CITY-ST-ZIP DAVENPORT FL 33837

TITLE ☐ Change ☒ Addition
NAME Blevins LAURA
STREET ADDRESS 501 JEREMY DRIVE
CITY-ST-ZIP Davenport FL 33837

TITLE ☒ Delete
NAME LAUREL, ROTH
STREET ADDRESS 509 JEREMY DR
CITY-ST-ZIP DAVENPORT FL 33837

TITLE ☐ Change ☐ Addition
NAME KROI DEMARIS
STREET ADDRESS 211 JEREMY DRIVE
CITY-ST-ZIP Davenport FL 33837

TITLE ☒ Delete
NAME BERTHIAUME, JOE
STREET ADDRESS 619 JEREMY DR
CITY-ST-ZIP DAVENPORT FL 33837

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME Blevins RALPH
STREET ADDRESS 501 JEREMY DRIVE
CITY-ST-ZIP DAVENPORT FL 33837

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME TAPLEY JANIE
STREET ADDRESS 824 JEREMY DRIVE
CITY-ST-ZIP DAVENPORT FL 33837

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

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:

Ralph Blevins

Ralph Blevins - President

2-22-07

863-424-3662

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #