

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT


FILED
Apr 13, 2004 8:00 am
Secretary of State

04-13-2004 90032 022 ****61.25

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01062004 Chg-NP CR2E037 (10/03)

DOCUMENT # N95000003798					
1. Entity Name VILLAS AT SPRING CREEK HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 1596 DERBY LANE MELBOURNE, FL 32935 US			Mailing Address 1596 DERBY LANE MELBOURNE, FL 32935 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3326273	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For Not Applicable	
6. Name and Address of Current Registered Agent CARROLL, EDWARD T 3447 HORSE CREEK CIRCLE MELBOURNE, FL 32935				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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 reissuing)</small> DATE _____					
Filing Fee is \$61.25 Due by May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CARROLL, EDWARD T		NAME	JAMES GENORON	
STREET ADDRESS	3447 HORSE CREEK CIRCLE		STREET ADDRESS	1591 DERBY LANE	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE	VP	<input checked="" type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GENORON, JAMES		NAME	ROBERT KLAPROTH	
STREET ADDRESS	1591 DERBY LANE		STREET ADDRESS	1630 DERBY LANE	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE	S	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOMBROWSKI, DOROTHY A		NAME		
STREET ADDRESS	1641 DERBY LANE		STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JONES, FRED		NAME		
STREET ADDRESS	1630 DERBY LANE		STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP		
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KLAPROTH, ROBERT		NAME	JACK GOODWIN	
STREET ADDRESS	1620 DERBY LANE		STREET ADDRESS	3456 HORSE CREEK CIRCLE	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	MELBOURNE, FL 32935	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DOMBROWSKI, THOMAS		NAME	DOMBROWSKI, THOMAS	
STREET ADDRESS	1641 DERBY LN.		STREET ADDRESS	1641 DERBY LN.	
CITY-ST-ZIP	MELBOURNE, FL 32935		CITY-ST-ZIP	MELBOURNE, FL 32935	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: <i>James Genoron</i>			4/7/04 751-9917		
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			Date Daytime Phone #		