

# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000005823

FILED  
Mar 29, 2005  
Secretary of State

**Entity Name:** THE RESERVE OF OLD TAMPA BAY HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3974  
TAMPA ROAD STE. B  
OLDSMAR, FL 34677

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 2157  
OLDSMAR, FL 34677

**New Mailing Address:**

**FEI Number:** 59-3416781

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

JACK, HANSON  
3974 TAMPA ROAD  
STE. B  
OLDSMAR, FL 34677 US

**Name and Address of New Registered Agent:**

JACK, HANSON B  
3974 TAMPA ROAD  
STE. B  
OLDSMAR, FL 34677 US

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: JACK B. HANSON

03/29/2005

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: BRYLAWSKI, ROD  
Address: 4120 CAUSEWAY VISTA DR  
City-St-Zip: TAMPA, FL 33615

Title: VPD ( ) Delete  
Name: ACTON, TY  
Address: 4111 CAUSEWAY VISTA DR.  
City-St-Zip: TAMPA, FL 33615

Title: STD ( ) Delete  
Name: KNIGHT, LEANN  
Address: 4101 CAUSEWAY VISTA DR.S  
City-St-Zip: TAMPAS, FL 33615

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LEAL, RON  
Address: 4105 CAUSEWAY VISTA DRIVE  
City-St-Zip: TAMPA, FL 33615

Title: VPD (X) Change ( ) Addition  
Name: BLANKENSHIP, KIRBY  
Address: 4102 CAUSEWAY VISTA DRIVE  
City-St-Zip: TAMPA, FL 33615

Title: STD (X) Change ( ) Addition  
Name: GONZALEZ, MIKE  
Address: 4122 CAUSEWAY VISTA DRIVE  
City-St-Zip: TAMPA, FL 33615

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: JACK B. HANSON

AGEN

03/29/2005

Electronic Signature of Signing Officer or Director

Date