

**2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Mar 05, 2006  
Secretary of State**

DOCUMENT# N97000006852

Entity Name: STEPHEN'S MANOR HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

1140 NW 76TH ST  
MIAMI, FL 33150

**New Principal Place of Business:**

**Current Mailing Address:**

1140 NW 76TH ST  
MIAMI, FL 33150

**New Mailing Address:**

FEI Number: FEI Number Applied For ( ) FEI Number Not Applicable (X) Certificate of Status Desired ( )

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

SPARKS, LOUIS  
1140 NW 76TH ST  
MIAMI, FL 33150 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: D ( ) Delete  
Name: FORBES, ANITA  
Address: 1140 N.W. 76 STREET  
City-St-Zip: MIAMI, FL 33156

Title: 1VP ( ) Delete  
Name: ROLLE, RUTH  
Address: 7733 NW 14 PLACE  
City-St-Zip: MIAMI, FL 33147

Title: TD ( ) Delete  
Name: ALLEN, RUBY  
Address: 7770 NW 8 COURT  
City-St-Zip: MIAMI, FL 33150

Title: 2VP ( ) Delete  
Name: BOOZE, WILLIAM  
Address: 7733 NW 10 AVE.  
City-St-Zip: MIAMI, FL 33150

Title: D ( ) Delete  
Name: BUTLER, GEORGE  
Address: 7515 NW 14 COURT  
City-St-Zip: MIAMI, FL 33147

Title: D ( ) Delete  
Name: BURNS, WILLIE  
Address: 7330 N.W. 8 AVENUE  
City-St-Zip: MIAMI, FL 33150

**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:

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 Chapter 119, 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: LOUIS E. SPARKS

PRES

03/05/2006

Electronic Signature of Signing Officer or Director

Date