

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N98000004139

FILED
Apr 30, 2007
Secretary of State

Entity Name: THE OSPREY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

1817 HIGHLAND ROAD
OSPREY, FL 34229

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1366
NOKOMIS, FL 342741366 US

New Mailing Address:

FEI Number: 65-0849962

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

NICHOLS, CHARLES N P
1817 HIGHLAND ROAD
OSPREY, FL 34229 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: VPD () Delete
Name: MARCHIONE, DAVID
Address: 1827 HIGHLAND RD
City-St-Zip: OSPREY, FL 34229

Title: PTD () Delete
Name: NICHOLS, CHARLES
Address: 1817 HIGHLAND ROAD
City-St-Zip: OSPREY, FL 34229

Title: SD () Delete
Name: SCOTT, VIRGINIA
Address: 1819 HIGHLAND RD
City-St-Zip: OSPREY, FL 34229

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 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: CHARLES NICHOLS

PTD

04/30/2007

Electronic Signature of Signing Officer or Director

Date