2007 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT DOCUMENT # N98000005249 1. Entity Name SII VER CREEK RESIDENTS' ASSOCIATION, INC.

3. Dergado

FILED Feb 05, 2007 8:00 am Secretary of State 02-05-2007 90085 003 ****61.25

SIEVER CREEK RESIDENTS ASSOCIATION, INC.									
27499 RIVERVIEW CENTER BLVD %I SUITE 207 27		%IN 274	Mailing Address %INDEPENDENT MANAGEMENT LLC 27499 RIVERVIEW CENTER BLVD #207 BONITA SPRINGS, FL 34134			E HATIKAK FIO ITIRA I	EKI ESIN AFRI TEIN ESIN ESIN	. EMIR 1440 BIFTR 14	
2. Principal Place of Business - No P.O. Box #			3. Mailing Address						
Suite, Apt. #, etc.			Suite, Apt. #, etc.			01292007 Ch	g-NP CR2E	037 (12/06)	
City & State			ty & State			4. FEI Number Applied For 59-3571353 Not Applicable			
Zip Country			tip Coun		ntry	5. Certificate of Sta		\$8.75 Add Fee Require	
	6. Name and Address of Cu	ed Agent		Name	7. Name and Addr	ess of New Registere	d Agent		
INDEPENDENT MANAGEMENT LLC 27499 RIVERVIEW CENTER BLVD SUITE 207 PONITA SPRINCS EL 24424					Street Address (P.O. Box Number is Not Acceptable)				
BONITA SPRINGS, FL 34134			City		City		F	Zip Cod	e
8. The above	named entity submits this statem	ent for the pure	ose of changing its	reaistere	d office or registe	ered agent, or both, in t			and accept
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 Signature, hyped or printed name of registered agent and title if applicable. (NOTE: Registered Agent alignature required when reinstalling) DATE									
Filing Fee is \$61.25 Due by May 1, 2007			9. Election Campaign Financing Trust Fund Contribution.		\$5.00 May Be Added to Fees		ck payable to artment of St	l II	
10. OFFICERS AND DIRECT			TORS 11.			ADDITIONS/CHANGE	S TO OFFICERS AND	DIRECTORS IN	10
TITLE	STD	Delete TITLE					Change	Addition	
NAME OTHER ADDRESS	BUTT, CHARLES H s 23656 STONY RIVER PLACE			T ADORESS				l	
STREET ADDRESS CITY-ST-ZIP	BONITA SPRINGS, FL 341				ST-ZIP				
TITLE	VP	Delete	TITLE	-			☐ Change	Addition	
NAME	HUCK, GREG			NAME					_
STREET ADDRESS	ł				T ADDRESS				
CITY-ST-ZIP	BONITA SPRINGS, FL 34135		ei	CITY-ST-ZIP					T tard
TITLE	RISSER, GENE.		☐ Delete	NAME		-		☐ Change	Addition
STREET ADDRESS				STREE	T ADDRESS				!
CITY-ST-ZIP	2011/7/01/11/100,7/2 07/100		СПҮ-	ŠT-ZIP					
TITLE	YP		☐ Defete	TITLE				☐ Change	☐ Addition
NAME STREET ADDRESS	TED BEGANSKY 23736 STONEY ELVE	e DUACE		NAME	T ADDRESS				
CITY-ST-ZIP	BONITA SPIZINGS, 7	FL 34135	5		ST-ZIP				ţ
TITLE	* * * * * * * * * * * * * * * * * * * *		☐ Defete	TITLE				☐ Change	☐ Addition
NAME				NAME	i i				ł
STREET ADDRESS CITY-ST-ZIP					T ADDRESS ST-ZIP				!
TITLE		_	☐ Delete	TITLE				☐ Change	Addition
NAME				NAME				<u> </u>	
STREET ADDRESS				T ADDRESS				ĺ	
CITY-ST-ZIP	and the short the information and the	and contribution filtra-	door not sustify to		ST-ZIP	d in Chanter 110. Flori	ida Statutos I fuetbor o	artify that the in	formation
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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 crustee 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: \$\frac{1}{29/07} 239.4441714									
SIGNATURE: SIGNATURE AND TYPEGOR PRINTED HARREST PRINTED HARRE									