

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000004169

FILED
Apr 30, 2004
Secretary of State

Entity Name: SAM ALLEN OAKS HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

3509 SAM ALLEN OAKS CIR.
PLANT CITY, FL 33565

New Principal Place of Business:

Current Mailing Address:

PO BOX 1326
PLANT CITY, FL 33564

New Mailing Address:

FEI Number: 59-3605261

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ROTH, DON
3509 SAM ALLEN OAKS CIR.
PLANT CITY, FL 33565

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: PD () Delete
Name: HEATON, MARK
Address: 3305 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

Title: SD () Delete
Name: ROTH, DON
Address: 2208 VILLAGE AT PARK ROAD
City-St-Zip: PLANT CITY, FL 33566

Title: SD () Delete
Name: SITZE, AMY
Address: 3325 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

Title: VPD () Delete
Name: WALDING, TRACI
Address: 3525 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: WILLIAM, TIM
Address: 3505 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

Title: SD (X) Change () Addition
Name: ARCHBELL, RAE
Address: 3314 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

Title: TD (X) Change () Addition
Name: SITZE, AMY
Address: 3325 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

Title: VPD (X) Change () Addition
Name: BATLEY, JEFF
Address: 3501 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

Title: D () Change (X) Addition
Name: PULLEY, ROGER
Address: 3306 SAM ALLEN OAKS CIR.
City-St-Zip: PLANT CITY, FL 33565

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: AMY SITZE

TD

04/30/2004

Electronic Signature of Signing Officer or Director

Date