

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000006517

FILED
Apr 11, 2006
Secretary of State

Entity Name: PLACID WOODS PHASE II & III HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

498 PALM SPGS. DR.
235
ALTAMONTE SPRINGS, FL 32701

New Principal Place of Business:

Current Mailing Address:

498 PALM SPGS. DR.
235
ALTAMONTE SPRINGS, FL 32701

New Mailing Address:

FEI Number: 59-3608902

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

BOYLE, JIM
C/O BOYLE MANAGEMENT SERVICES
498 PALM SPRINGS DR.
ALTAMONTE SPRINGS, FL 32701 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: PD () Delete
Name: THRON, LORI
Address: 136 GLEASON COVE
City-St-Zip: SANFORD, FL 32773

Title: ST () Delete
Name: RIOS SANTANA, MIQUEL
Address: 117 PLACID WOODS CT
City-St-Zip: SANFORD, FL 32773

Title: VP () Delete
Name: CHAVEZ, WANDA
Address: 109 GLEASON COVE
City-St-Zip: SANFORD, FL 32773

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

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

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: D () Change (X) Addition
Name: TIDWELL, NICK
Address: 106 PLACID WOODS
City-St-Zip: SANFORD, FL 32733

Title: D () Change (X) Addition
Name: ZAIDO, JANICE
Address: 131 GLEASON
City-St-Zip: SANFORD, FL 32773

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: LORI THRON

PD

04/11/2006

Electronic Signature of Signing Officer or Director

Date