2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2005 8:00 am
Secretary of State
04-20-2005 90349 047 ****61.25

DOCUMENT # 705101

1. Entity Name
COUNTRY CLUB SHORES CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
513 SCHOONER LN P.O. BOX 8112 LONGBOAT KEY, FL 34228	513 SCHOONER LN P.O. BOX 8112 LONGBOAT KEY, FL 34228

04152005 Chg-NP CR2E037 (10/03)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 23-7372818 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
CAMPBELL, JAMES 513 SCHOONER LANE LONG BOAT KEY, FL 34228	Name Street Address (P.O. Box Number is Not Acceptable) City **FL** Zip Code

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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SAWYER, J 500 YOU LN LONGBOAT KEY, FL 34228	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Gary Coffin 501 Kerch Ln. Longboat Key FL 34228	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD CAMPBELL, JAMES 513 SCHOONER LONGBOAT KEY, FL 34228	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S WINTERS, BARBARA 537 SCHOONER LONGBOAT KEY, FL 34228	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Bill Solmon & Carole Solmon 500 Cutter Ln Longboat Key FL 34228	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BOLLA, ROBERT 512 SCHOONER LANE LONGBOAT KEY, FL 34228	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Mary Beth Bolla 512 Schooner Lane Longboat Key FL	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ROSE, ALAN 548 SCHOONER LANE LONGBOAT KEY, FL 34228	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	Sandy Eden 513 Yawl Lane Longboat Key FL 34228	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P ELLIOT, MYRON DR 585 CUTTER LANE LONGBOAT KEY, FL 34228	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: James C. Campbell Treasurer James C. Campbell 4/10/05 941-383-2587
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #