
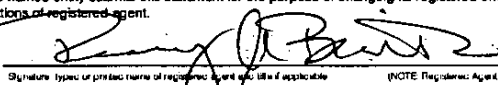
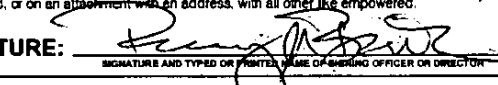


FILED
Mar 01, 2006 8:00 am
Secretary of State

03-01-2006 90012 017 ****61.25

**2006 NOT-FOR-PROFIT CORPORATION
 ANNUAL REPORT**

DOCUMENT # 720786				<div style="font-size: 2em; font-weight: bold;">40021710</div> 	
1. Entity Name CHARLOTTE SHORES ONE PROPERTY OWNERS' ASSOCIATION, INC.					
Principal Place of Business		Mailing Address			
5090 GENESEE PKWY BOKEELIA, FL 33922 US		P.O. BOX 320 BOKEELIA, FL 33922 US			
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		02062006 Chg-NP CR2E037 (11/05)	
City & State		City & State		4. FEI Number 59-1823244	
Zip		Zip		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
BRUNER, SANDRA 5090 GENESEE PKWY BOKEELIA, FL 33922				Name Rosemary A. Baird, Esq. Street Address (P.O. Box Number is Not Acceptable) 2026 Henley Place City ROCKY HILLS FL Zip Code 33901	
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 				DATE 2/28/06	
Filing Fee is \$61.25 Due by May 1, 2006				9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	P	<input type="checkbox"/> Delete	TITLE	Oscar Edlow P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCULLOUGH, SALLYE		NAME	STUBLINGAN LANE	
STREET ADDRESS	5090 GENESEE PKWY		STREET ADDRESS	Bokeelia FL 33922	
CITY-ST-ZIP	BOKEELIA, FL 33922		CITY-ST-ZIP		
TITLE	VP	<input type="checkbox"/> Delete	TITLE	VP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PEIRCE, SUSAN		NAME	JOEDUNIAP	
STREET ADDRESS	5124 GENESEE PKWY		STREET ADDRESS	5259 GENESEE PKWY	
CITY-ST-ZIP	BOKEELIA, FL 33922		CITY-ST-ZIP	Bokeelia FL 33922	
TITLE	S	<input type="checkbox"/> Delete	TITLE	S	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAITSON, ROSE		NAME	MARKLOW BAZZINS	
STREET ADDRESS	5711 LINDEN LN		STREET ADDRESS	11407 PLANT DR.	
CITY-ST-ZIP	BOKEELIA, FL 33922		CITY-ST-ZIP	Bokeelia FL 33922	
TITLE	T	<input type="checkbox"/> Delete	TITLE	Rosemary A. Baird	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BOYD, NANCY		NAME	5711 LINDEN LANE	
STREET ADDRESS	5115 GENESEE PKWY		STREET ADDRESS	Bokeelia FL 33922	
CITY-ST-ZIP	BOKEELIA, FL 33922		CITY-ST-ZIP		
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CONLYN, ANDREW		NAME	ANDREW CONLYN	
STREET ADDRESS	P. O. BOX 3037		STREET ADDRESS	P.O. BOX 3037	
CITY-ST-ZIP	BOKEELIA, FL 33922		CITY-ST-ZIP	Bokeelia FL 33922	
TITLE	D	<input type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRAFT, JANET		NAME	Thomas Coulbourn	
STREET ADDRESS	5120 GENESEE PKWY		STREET ADDRESS	5795 GENESEE PKWY - 4	
CITY-ST-ZIP	BOKEELIA, FL 33922		CITY-ST-ZIP	Bokeelia FL 33922	
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 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: 				DATE 2/28/06 (239) Daytime Phone # 333-2401	