

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 06, 2006 8:00 am
Secretary of State

02-06-2006 90075 015 ****61.25



DOCUMENT # 735108
 1. Entity Name
CARRIAGE VILLAGE LANDOWNERS' ASSOCIATION, INC.

Principal Place of Business: **5451 BAYSHORE ROAD NORTH FORT MYERS FL 33917**
 Mailing Address: **5451 BAYSHORE ROAD NORTH FORT MYERS FL 33917**

2. Principal Place of Business: Suite, Apt. #, etc.
 3. Mailing Address: Suite, Apt. #, etc.

City & State: _____ City & State: _____

Zip: _____ Country: _____ Zip: _____ Country: _____



1st MOORE CR2E037 (10/05)

4. FEI Number: **59-1916766** Applied For: Not Applicable:

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

6. Name and Address of Current Registered Agent
MAHER, ROBERT T ESQ
1601 JACKSON ST.
#201
FORT MYERS FL 33901

7. Name and Address of New Registered Agent
 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: _____ (NOTE: Registered Agent signature required when reinstating) DATE: _____

FILE NOW: FEE IS \$61.25
Due By May 1, 2006

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	DP	<input checked="" type="checkbox"/> Delete	TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BROWN, FREDERIC		NAME	Walter, Mark	
STREET ADDRESS	203 BRANDYWINE LANE		STREET ADDRESS	392 Santa Fe Trail	
CITY-ST-ZIP	NORTH FORT MYERS FL 33917		CITY-ST-ZIP	North Fort Myers, FL 33917	
TITLE	DVP	<input type="checkbox"/> Delete	TITLE	DVP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WALTER, MARK		NAME	Waite, Delores	
STREET ADDRESS	392 SANTA FE TRAIL		STREET ADDRESS	213 Brandywine Lane	
CITY-ST-ZIP	N. FT. MYERS FL 33917		CITY-ST-ZIP	North Fort Myers, FL 33917	
TITLE	DVP	<input checked="" type="checkbox"/> Delete	TITLE	DT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BROWN, FREDERIC		NAME	Goostree, Evelyn	
STREET ADDRESS	203 BRANDYWINE LANE		STREET ADDRESS	177 Overland Trail	
CITY-ST-ZIP	NORTH FORT MYERS FL 33917		CITY-ST-ZIP	North Fort Myers, FL 33917	
TITLE	DT	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	HUNTLEY, JOYCE		NAME	Toth, Joseph	
STREET ADDRESS	210 SHENANDOAH LANE		STREET ADDRESS	204 Village Lane	
CITY-ST-ZIP	N FORT MYERS FL 33917		CITY-ST-ZIP	North Fort Myers, FL 33917	
TITLE	DS	<input type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BORGHESE, CAROL		NAME	Herman, James	
STREET ADDRESS	250 SANTA FE TRAIL		STREET ADDRESS	215 Harvest Lane	
CITY-ST-ZIP	N. FORT MYERS FL 33917		CITY-ST-ZIP	North Fort Myers, FL 33917	
TITLE	D	<input type="checkbox"/> Delete	TITLE	DS	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KRETTLER, KARL		NAME	Pendell, Stephanie	
STREET ADDRESS	185 OVERLAND TRL.		STREET ADDRESS	236 Santa Fe Trail	
CITY-ST-ZIP	NORTH FORT MYERS FL 33917		CITY-ST-ZIP	North Fort Myers, FL 33917	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Mark A. Walter* **MARK A. WALTER** 1-24-06 239-543-2771