


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 29, 2007 8:00 am**  
**Secretary of State**

01-29-2007 90072 004 \*\*\*\*61.25

**DOCUMENT # 748126**

1. Entity Name  
**COACHMAN CREEK CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
 2625 ST RD 590  
 CLEARWATER, FL 33759 US

Mailing Address  
 2625 ST RD 590  
 OFFICE  
 CLEARWATER, FL 33759 US

2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country Zip Country

01232007 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-1963104**

Applied For  
 Not Applicable

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

**6. Name and Address of Current Registered Agent**

SCHULTZ, CLARA S.  
 2755 CURLEW RD.  
 SUITE 76  
 PALM HARBOR, FL 34684

**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 *[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, 2007**

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**

TITLE	D	<input type="checkbox"/> Delete
NAME	BRADLEY, EDWARD	
STREET ADDRESS	2625 ST RD 590 #1421	
CITY - ST - ZIP	CLEARWATER, FL 33759	
TITLE	D	<input type="checkbox"/> Delete
NAME	BOGDAN, PETER	
STREET ADDRESS	2625 ST. RD 590 #1511	
CITY - ST - ZIP	PALM HARBOR, FL 34683	
TITLE	T	<input type="checkbox"/> Delete
NAME	GOODLESS, NEAL	
STREET ADDRESS	2625 ST. RD 590 #2324	
CITY - ST - ZIP	CLEARWATER, FL 33759	
TITLE	VP	<input type="checkbox"/> Delete
NAME	WERNER, MICHAEL	
STREET ADDRESS	2625 ST RD 590 #222	
CITY - ST - ZIP	CLEARWATER, FL 33759	
TITLE	P	<input type="checkbox"/> Delete
NAME	HART, JEFF	
STREET ADDRESS	2625 ST RD 590 #2812	
CITY - ST - ZIP	CLEARWATER, FL 33759	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

**11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10**

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

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: *Clara Schultz, Corp. Agent* **Jan 25, 07 (727) 797-9701**  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #