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 Feb 22, 2007 8:00 am
 Secretary of State

01-22-2007 90082 045 ****61.25

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

DOCUMENT # 749695					
1. Entity Name CANOE CREEK PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 1147 PALM CITY, FL 34991			Mailing Address P.O. BOX 1147 PALM CITY, FL 34991		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.		01082007 Chg-NP CR2E037 (12/06)	
City & State		City & State		4. FEI Number 59-2374960 <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
Zip	Country	Zip	Country	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		
BONAN, ELIZABETH ESQ. 759 SOUTH FEDERAL HWY SUITE 212 STUART, FL 34994			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 _____ DATE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when remaining)</small>					
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	PD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WERLE, CREG <i>President</i>	NAME			
STREET ADDRESS	1047 WOOD CREEK DRIVE	STREET ADDRESS			
CITY-ST-ZIP	PALM CITY, FL 34990	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BATEMAN, JOHN <i>Delete</i>	NAME	Terry Gifford <i>Director</i>		
STREET ADDRESS	3423 SW ASH PLACE	STREET ADDRESS	1022 Poplar Court <i>Board Member</i>		
CITY-ST-ZIP	PALM CITY, FL 34990	CITY-ST-ZIP	Palm City, Florida 34990		
TITLE	VP,D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	SPATUZZI, JOHN <i>Vice President</i>	NAME			
STREET ADDRESS	391 SW HICKORY PLACE	STREET ADDRESS			
CITY-ST-ZIP	PALM CITY, FL 34990	CITY-ST-ZIP			
TITLE	S/TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	BOND, MARILYN <i>Sec/Treasure</i>	NAME			
STREET ADDRESS	1003 SW WILLOW LANE	STREET ADDRESS			
CITY-ST-ZIP	PALM CITY, FL 34990	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	WERLE, CRAIG <i>President</i>	NAME			
STREET ADDRESS	1047 SW WOODCREEK DR.	STREET ADDRESS			
CITY-ST-ZIP	PALM CITY, FL 34990	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HAMSHAR, TERRY <i>Director</i>	NAME			
STREET ADDRESS	3370 SW HICKORY PLACE <i>Board Member</i>	STREET ADDRESS			
CITY-ST-ZIP	PALM CITY, FL 34990	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 filers empowered.					
SIGNATURE: <i>Marilyn O Bond</i>		1/15/07 772-2208443			
<small>Signature and Title or Printed Name of Elected Officer or Director</small>		<small>Date</small>			