

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 28, 2005 8:00 am
Secretary of State

01-28-2005 90025 009 ****70.00

DOCUMENT # 752720
 1. Entity Name
 COUNTRY WALK ESTATE HOMES ASSOCIATION, INC.



Principal Place of Business
 14601 COUNTRY WALK
 MIAMI, FL 33186

Mailing Address
 P.O BOX 924176
 MIAMI, FL 33092

40008333



2. Principal Place of Business
 Suite, Apt. #, etc.

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

01142005 Chg-NP CR2E037 (10/03)

City & State
 Zip Country

4. FEI Number
 59-2025974

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 SKRLD, INC.
 201 ALHAMBRA CIRCLE
 SUITE 1102
 CORAL GABLES, FL 33134

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, 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

TITLE NAME	D GERSHEN, LARRY	<input type="checkbox"/> Delete
STREET ADDRESS	14601 COUNTRY WALK DRIVE	
CITY-ST-ZIP	MIAMI, FL 33186	
TITLE NAME	D JONES, DAVID	<input type="checkbox"/> Delete
STREET ADDRESS	14505 SW 141 PL.	
CITY-ST-ZIP	MIAMI, FL 33186	
TITLE NAME	VP MYERS, CHRIS	<input type="checkbox"/> Delete
STREET ADDRESS	14438 SW 141 PL	
CITY-ST-ZIP	MIAMI, FL 33186	
TITLE NAME	T JANOSKY, MIKE	<input type="checkbox"/> Delete
STREET ADDRESS	14815 SW 153RD STREET	
CITY-ST-ZIP	MIAMI, FL 33186	
TITLE NAME	P ROBEN, MICHAEL	<input checked="" type="checkbox"/> Delete
STREET ADDRESS	14900 SW 145TH STREET	
CITY-ST-ZIP	MIAMI, FL 33186	
TITLE NAME	D HEINZEN, KEN	<input type="checkbox"/> Delete
STREET ADDRESS	14643 SW 141 CT	
CITY-ST-ZIP	MIAMI, FL 33186	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE NAME	D Sid Kotkin	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	5025 SW 148 Street	
CITY-ST-ZIP	Miami FL 33186	
TITLE NAME	Debbie Waddell	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
STREET ADDRESS	14721 SW 148 Avenue	
CITY-ST-ZIP	Miami, FL 33186	
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE NAME		<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS		
CITY-ST-ZIP		

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: LAWRENCE GERSHEN Jan. 24, 2005 305-238-9336
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #