

**2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED  
Apr 15, 2004  
Secretary of State**

DOCUMENT# 759819

Entity Name: COUNTRY CLUB VILLAS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

3133 IRONWOOD DR  
TALLAHASSEE, FL 32309 US

**New Principal Place of Business:**

**Current Mailing Address:**

3133 IRONWOOD DR  
TALLAHASSEE, FL 32309 US

**New Mailing Address:**

FEI Number: 59-2346613      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SLATTERY, SHERRY  
3133 IRONWOOD DR  
TALLAHASSEE, FL 32309

**Name and Address of New Registered Agent:**

MARTINSON, GREGORY D SEC'Y  
3048 IRONWOOD DR  
TALLAHASSEE, FL 32309

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.

SIGNATURE: GREGORY D MARTINSON

04/15/2004

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: PD ( ) Delete  
Name: MARTINSON, GREG  
Address: 3048 IRONWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D ( ) Delete  
Name: STROFFOLINO, DAVID  
Address: 3072 IRON WOOD DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: VPD ( ) Delete  
Name: JONES, PERRY  
Address: 3092 IRONWOOD DR.  
City-St-Zip: TALLAHASSEE, FL 32309

Title: SD ( ) Delete  
Name: SLATTERY, SHERRY  
Address: 3040 IRONWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: TD ( ) Delete  
Name: MONTANARO, VICTORIA  
Address: 3052 IRONWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32309

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: SD (X) Change ( ) Addition  
Name: MARTINSON, GREGORY  
Address: 3048 IRONWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: D (X) Change ( ) Addition  
Name: STROFFOLINO, DAVID  
Address: 3072 IRONWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: PD (X) Change ( ) Addition  
Name: SLATTERY, SHERRY  
Address: 3040 IRONWOOD DR  
City-St-Zip: TALLAHASSEE, FL 32309

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: GREGORY MARTINSON

S

04/15/2004

Electronic Signature of Signing Officer or Director

Date