

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759819

FILED
Apr 20, 2006
Secretary of State

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:

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

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

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

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

Title: VPD () Delete
Name: FOX, PEGGY
Address: 3064 IRONWOOD DR.
City-St-Zip: TALLAHASSEE, FL 32309

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

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

Title: PD (X) Change () Addition
Name: FOX, PEGGY
Address: 3064 IRONWOOD DR.
City-St-Zip: TALLAHASSEE, FL 32309

Title: VPD (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 Chapter 119, 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 D MARTINSON

SD

04/20/2006

Electronic Signature of Signing Officer or Director

_____ Date