## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**DOCUMENT# 764731** 

FILED Apr 09, 2007 Secretary of State

Entity Name: COUNTRYBROOK CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:		
4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US						
Current Mailing Address:				New Mailing Address:		
4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US						
FEI Number:	59-2350099	FEI Number Applied For ( )	FEI Nur	nber Not Applicable ( )	Certificate of Status Desired ( )	
Name and Address of Current Registered Agent:				Name and Address of New Registered Agent:		
MAUREEN C. REARDON 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US				REARDON, MAUREEN C 4151 WOODLANDS PARKWAY PALM HARBOR, FL 34685 US		
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: MAUREEN C. REARDON					04/09/2007	
	Electro	onic Signature of Registered Age	nt		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:		
Title: Name: Address: City-St-Zip:	ARESTIA, RO 2815 COUNT	) Delete SARIO RYBROOK DR. #M15 DR, FL 34684		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	KULESA, STA 2850 COUNT	) Delete NLEY RYBROOK DR, #F-23 DR, FL 34684		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	FALCIONE, P 2816 COUNT	) Delete AM RYBROOK DRIVE I13 DR, FL 34684		Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	SD ( ) Delete SERLIN, BEVERLY 2850 COUNTRYBROOK DRIVE, F-15 p: PALM HARBOR, FL 34684			Title: Name: Address: City-St-Zip:	( ) Change ( ) Addition	
Title: Name: Address: City-St-Zip:	MIHALOVICS 2845 COUNT	) Delete , LOU RYBROOK DRIVE G13 DR, FL 34684		Title: Name: Address: City-St-Zip:	() Change () Addition	

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: STAN KULESA PD 04/09/2007