

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

**FILED**  
97 JUL 10 AM 8:50  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # 7660398  
1. Corporation Name  
**COUNTRY CREEK PROPERTY OWNERS ASSOCIATION, Inc.**

Principal Place of Business Mailing Address  
**PO BOX 20623  
SARASOTA FL 34276**

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified <b>JAN 3 1988</b>	3a. Date of Last Report <b>MAY 1996</b>
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number <b>59-2313593</b>	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
24	Country	29	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>GARY J. LAUBACKER 4622 BAYCEDAR LN SARASOTA FL 34241</b>				10. Name and Address of New Registered Agent	
81 Name					
82 Street Address (P.O. Box Number is Not Acceptable)					
83					
84 City		FL	85 Zip Code		

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors and I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE **GARY J. LAUBACKER, TREASURER** DATE **6/14/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	<b>PRESIDENT LARRY FAETH</b>
STREET ADDRESS		1.3 STREET ADDRESS	<b>4400 BAYCEDAR LN</b>
CITY-ST-ZIP		1.4 CITY-ST-ZIP	<b>SARASOTA FL 34241</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		2.2 NAME	<b>VP THOMAS SPECTRA</b>
STREET ADDRESS		2.3 STREET ADDRESS	<b>450 BAYCEDAR LN</b>
CITY-ST-ZIP		2.4 CITY-ST-ZIP	<b>SARASOTA FL 34241</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	<b>TREASURER GARY J. LAUBACKER</b>
STREET ADDRESS		3.3 STREET ADDRESS	<b>4622 BAYCEDAR LN</b>
CITY-ST-ZIP		3.4 CITY-ST-ZIP	<b>SARASOTA FL 34241</b>
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	<b>SECRETARY BARBARA PARCASE</b>
STREET ADDRESS		4.3 STREET ADDRESS	<b>4410 BAYCEDAR LN</b>
CITY-ST-ZIP		4.4 CITY-ST-ZIP	<b>SARASOTA FL 34241</b>
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	<b>200002237642--8</b>
CITY-ST-ZIP		5.4 CITY-ST-ZIP	<b>-07/14/97--01163--006</b>
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	<b>*****61.25 *****61.25</b>
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: **GARY LAUBACKER** DATE **6/14/97** DAYTIME PHONE # **941-941-5739**

CR2E037 (9/96)