

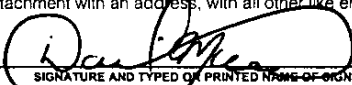


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90368 009 ****61.25

DOCUMENT # N01000001309					
1. Entity Name THE PRESERVE OF VERO HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 430 25TH AVE SW VERO BEACH, FL 32962			Mailing Address PO BOX 650366 VERO BEACH, FL 32965		
2. Principal Place of Business 835 20th Place		3. Mailing Address 835 20th Place			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State Vero Beach, FL		City & State Vero Beach, FL		02022006 Chg-NP CR2E037 (11/05)	
4. FEI Number 65-1089594		Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
Zip 32960		Country USA		Zip 32960	
Country USA		Country USA			
6. Name and Address of Current Registered Agent FRESE, GARY B 930 S. HARBOR CITY BLVD. SUITE 505 MELBOURNE, FL 32901			7. Name and Address of New Registered Agent Name: Karen Merrill Street Address (P.O. Box Number is Not Acceptable): 835 20th Place City: Vero Beach FL Zip Code: 32960		
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 _____ (NOTE: Registered Agent signature required when reinstating.) DATE _____					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees		Make check payable to Florida Department of State	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P LEWIS, SUSAN 430 25TH AVE SW VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D David Manor 2440 3rd Pl SW Vero Beach, FL 32962	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP SMITH, ED 2405 3RD PLACE SW VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP Jeff Luther 413 25th Ave SW Vero Beach, FL 32962	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LITTLEFIELD, NANCY JO 425 25TH AVE SW VERO BEACH, FL 32962	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	T Scott Wallace 2200 3rd Lane SW Vero Beach, FL 32962	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Bence Page 370 25th Ave SW Vero Beach, FL 32962	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Erica Poletz 420 21st Ct SW Vero Beach, FL 32962	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Marian Fell 2230 3rd place SW Vero Beach, FL 32962	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Tom Ammiration 2450 4th Lane SW Vero Beach, FL 32962	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: 			Date: 03/23/06		Daytime Phone #: 770-778-4111
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					