


**2006 NOT-FOR-PROFIT CORPORATION  
ANNUAL REPORT**

**FILED**  
**Jan 23, 2006 8:00 am**  
**Secretary of State**

01-23-2006 90123 039 \*\*\*\*61.25

<b>DOCUMENT # N03233</b>					
1. Entity Name <b>SECTION 23, PROPERTY OWNER'S ASSOCIATION, INC.</b>					
Principal Place of Business <b>26217 RAMPART BLVD. PUNTA GORDA, FL 33983</b>			Mailing Address <b>26217 RAMPART BLVD. PUNTA GORDA, FL 33983</b>		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number <b>59-2441507</b>	
				Applied For Not Applicable	
6. Name and Address of Current Registered Agent				5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
<b>OAKS, DAVID K 407 EAST MARION AVE. SUITE 101 PUNTA GORDA, FL 33950</b>				7. Name and Address of New Registered Agent	
				Name	
				Street Address (P.O. Box Number is Not Acceptable)	
				City	FL Zip Code
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>	
				<b>Make check payable to Florida Department of State</b>	
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	UNRAU, GLADWIN	NAME			
STREET ADDRESS	26036 LUZON CT.	STREET ADDRESS			
CITY-ST-ZIP	PUNTA GORDA, FL 33983	CITY-ST-ZIP			
TITLE	S <input checked="" type="checkbox"/> Delete	TITLE	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BOUCHER, TERESA	NAME	WOODS, RONALD		
STREET ADDRESS	1841 POLLARD AVE.	STREET ADDRESS	1241 NEAPOLITAN RD		
CITY-ST-ZIP	NORTH PORT, FL	CITY-ST-ZIP	PUNTA GORDA FL 33983		
TITLE	PD <input type="checkbox"/> Delete	TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition		
NAME	BRACKEN, ROBERT	NAME	BROWN, MARGARET		
STREET ADDRESS	1346 NEAPOLITAN ROAD	STREET ADDRESS	25318 CAYCE CT		
CITY-ST-ZIP	PUNTA GORDA, FL 33983	CITY-ST-ZIP	PUNTA GORDA, FL 33983		
TITLE	VD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	GOLDSTEIN, HARVEY	NAME			
STREET ADDRESS	25148 ROSAMOND COURT	STREET ADDRESS			
CITY-ST-ZIP	PUNTA GORDA, FL 33983	CITY-ST-ZIP			
TITLE	TD <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	HARRIS, JOSEPH	NAME			
STREET ADDRESS	25305 CAYCE COURT	STREET ADDRESS			
CITY-ST-ZIP	PUNTA GORDA, FL 33983	CITY-ST-ZIP			
TITLE	D <input type="checkbox"/> Delete	TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition		
NAME	VIGNA, ROBERT	NAME			
STREET ADDRESS	1372 BLUE LAKE CIRCLE	STREET ADDRESS			
CITY-ST-ZIP	PUNTA GORDA, FL 33983	CITY-ST-ZIP			
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: <i>Robert V Bracken</i>		ROBERT V BRACKEN		1/11/06 941-764-6674	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		PRESIDENT		Date Daytime Phone #	