2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 21, 2005 8:00 am
Secretary of State
03-21-2005 90075 038 ****61.25

DOCUMENT # N13257

1. Entity Name
COUNTRYWAY HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7001 TEMPLE TERRACE HIGHWAY TEMPLE TERRACE, FL 33637 US	7001 TEMPLE TERRACE HIGHWAY TEMPLE TERRACE, FL 33637 US

01112005 Chg-NP CR2E037 (10/03)

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 59-2628974 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MEZER, STEVEN P
220 SOUTH FRANKLIN STREET
TAMPA, FL 33602

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 _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2005

9. Election Campaign Financing Trust Fund Contribution. ☐ **$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	D KRAUSS, SIDNEY 11429 GEORGETOWN CIRCLE TAMPA, FL 33635	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Roy Quentmeyer 11718 Spanish Lake Dr. Tampa, FL 33635	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV CHAMPION, KARIN 8722 CHADWICK DR TAMPA, FL 33635	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DV Michael Reed 10208 Vista Pointe Drive Tampa, FL 33635	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP CHRISTIE, BILL 8719 IMPERIAL CT TAMPA, FL 33635	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP James Kannard 11404 Palm Pasture Drive Tampa, FL 33635	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT COUSINS, THOMAS 11228 BLOOMINGTON DRIVE TAMPA, FL 33635	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT Eric Kissel 11426 Georgetown Circle Tampa, FL 33635	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS PERRY, MICHAEL 11323 CLAYRIDGE DRIVE TAMPA, FL 33635	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS Mary Mostertz 11326 Bloomington Dr. Tampa, FL 33635	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ Change ☐ Addition

12. I 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 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: James Kannard James Kannard 3/2/05 813-477-2482
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #