2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 25, 2005
Secretary of State

DOCUMENT# N14015

Entity Name: HONORABLE COUNTRYPARK HOMEOWNERS ASSOCIATION OF PINELLAS COUNTY, INC.

Current Principal Place of Business:

P.O. BOX 15242
CLEARWATER, FL 33766 US

New Principal Place of Business:

Current Mailing Address:

PO BOX 15242
CLEARWATER, FL 33766 US

New Mailing Address:

FEI Number: 59-2722337 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

GRUTCHFIELD, SCOTT
2918 HILLECREEK CR S
CLEARWATER, FL 33759 US

Name and Address of New Registered Agent:

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: _____
Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title:	P	( ) Delete
Name:	ELLIS, DON	
Address:	2406 ANTHONY AVE	
City-St-Zip:	CLEARWATER, FL 33759 US	
Title:	T	( ) Delete
Name:	GRUTCHFIELD, SCOTT	
Address:	2918 HILLCREEK CR SO	
City-St-Zip:	CLEARWATER, FL 33759	
Title:	D	( ) Delete
Name:	BOWMAN, DANNY	
Address:	2418 ANTHONY AVE	
City-St-Zip:	CLEARWATER, FL 33759	
Title:	D	( ) Delete
Name:	STEVEN, JOE	
Address:	2407 ANTHONY AVE	
City-St-Zip:	CLEARWATER, FL 33759	
Title:	S	( ) Delete
Name:	SPINNICHIA, SAL	
Address:	2381 PARKSTREAM AVE	
City-St-Zip:	CLEARWATER, FL 33759	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	
Title:	( ) Change ( ) Addition
Name:	
Address:	
City-St-Zip:	

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SCOTT GRUTCHFIELD T 04/25/2005
Electronic Signature of Signing Officer or Director — Date