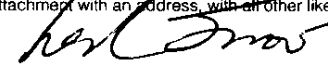


2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 13, 2008 8:00 am
Secretary of State

02-13-2008 90030 043 ****61.25

DOCUMENT # N14015 1. Entity Name HONORABLE COUNTRYPARK HOMEOWNERS ASSOCIATION OF PINELLAS COUNTY, INC.					
Principal Place of Business COUNTRYPARK SUBDIVISION CLEARWATER, FL 33766 US			Mailing Address PO BOX 15242 CLEARWATER, FL 33766 US		
2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2722337	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent LENETT, BLAKE 2454 ANTHONY AVE. CLEARWATER, FL 33759				7. Name and Address of New Registered Agent Name LES R SMOUT Street Address (P.O. Box Number is Not Acceptable) 2378 ANTHONY AVE City CLEARWATER FL Zip Code 33759	
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 				DATE 2-11-08	
Filing Fee is \$61.25 Due by May 1, 2008		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	P SMOUT, LES 2378 ANTHONY AVE. CLEARWATER, FL 33759 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	T, D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GRIFFIN, KEN 2368 PARKSTREAM AVE. CLEARWATER, FL 33759 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P, D ☒ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T LENETT, BLAKE 2454 ANTHONY AVE. CLEARWATER, FL 33759 ☒ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S SPINNICHIA, SAL 2381 PARKSTREAM AVE. CLEARWATER, FL 33759 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LEE, FRANK 2398 PARKSTREAM AVE. CLEARWATER, FL 33759 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	N ROBERTO, DEBBIE 2379 ANTHONY AVE. CLEARWATER, FL 33759 ☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ☒ Change ☐ 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 an other like empowered.					
SIGNATURE:  LES R SMOUT Treasurer 2-11-08					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date Daytime Phone #					

727-797-0680