

**NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT (AR)**

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90412 023 ****61.25

DOCUMENT # **N94000004315**
1. Entity Name
ARMOUR MANOR HOMEOWNERS ASSOCIATION, INC.



DO NOT WRITE IN THIS SPACE

40076304

2. Principal Place of Business 479 TEQUESTA DRIVE		3. Mailing Address 479 TEQUESTA DR.		4. FEI Number 05-0649100		Applied For Not Applicable	
Suite, Apt. #, etc. UNIT # 8		Suite, Apt. #, etc. UNIT 8		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
City & State TEQUESTA FLORIDA		City & State TEQUESTA, FLORIDA		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
Zip 33469	Country	Zip 33469	Country				

CR2E037B (8/05)

**DO NOT WRITE
IN THIS SPACE**

7. Name and Address of Current Registered Agent

Name DAVID JONES	
Street Address (P.O. Box Number is Not Acceptable) 479 TEQUESTA DRIVE # 8	
City TEQUESTA	Zip Code FL 33469

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: *David M Jones* (NOTE: Registered Agent signature required when reinstating) DATE: **4-25-06**

**FEE IS \$61.25
Initial or Amended AR**

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

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT JONES, DAVID 479 TEQUESTA DR # 8 TEQUESTA, FL 33469	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRESIDENT SAME
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP - BUSHWAY, BONNIE CHANGE 479 TEQUESTA DR # 7 TEQUESTA, FL 33469	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DVP CHRISTOPHER TAYLOR ADDITION 479 TEQUESTA DR # 3 TEQUESTA, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	DO NOT WRITE IN THIS SPACE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MAUROKAS, NANCY DELETE 479 TEQUESTA DR # 10 TEQUESTA, FL 33469	TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BUSHWAY, BONNIE CHANGE 479 TEQUESTA DR # 7 TEQUESTA, FL 33469
TITLE NAME STREET ADDRESS CITY-ST-ZIP		TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 on an attachment with an address, with all other like empowered.

SIGNATURE: *David M Jones* DATE: **4-25-06**