2006 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT



FILED

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT								Feb 27, 2006 8:00 am Secretary of State					
DOCUMENT # N9400004444 1. Entity Name CANTERBURY VILLAGE HOMEOWNERS ASSOCIATION, INC										ry 0 90048 00			
Principal Place of Business C/O GREEN ACRES PROPERTIES 4131 GUNN HIGHWAY TAMPA, FL 33618 US				Mailing Address C/O GREEN ACRES PROPERTIES 4131 GUNN HIGHWAY TAMPA, FL 33618 US				. (1888)					110 1 50
Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.				01142006 Cho.NP CR2E037 (11/05)						
City & State			City & State				4. FEI Numi	oer one		CHZEUS	97 (11/05) A	pplied For	
Zip Country			Zip Co			intry		5 Certificate of Status Desired 38.75 Additional					
*	6 Name	and Address of Comment										Fee Require	×d
6. Name and Address of Current Registered Agent MEIROSE & FRISCIA, P.A.						7. Name and Address of New Registered Agent \ Name							
ATTN: FRANCIS E. FRISCIA, ESQ. 500 N. WESTSHORE BLVD, SUITE 830 TAMPA, FL 33609						Street Address (P.O. Box Number is Not Acceptable)							
						City			*** * * * * ***	· · · · · · · · · · · · · · · · · · ·	FL	Zip Cod	ie
The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Rorida. 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: Register Filling Fee is \$81.25 9. Election Campaign Due by May 1, 2006 Trust Fund Contribu								Andreas aminetations			DATE		
	_			9. Election Cam	paign F	inancing	re required	\$5.00 May			lake check		
10	_	fay 1, 2006		9. Election Cam Trust Fund Co	paign F ontributi	inancing	0	\$5.00 May Added to Fee	s	Floa	lake checi rida Depar	tment of S	itate
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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 reporter 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 attactment with an address, with all other like empowered.

SIGNATURE:

TREASUNEA