


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 03, 2006 8:00 am
Secretary of State

04-03-2006 90397 007 ****61.25

DOCUMENT # N95000005949

1. Entity Name
 CORTEZ PARK HOMEOWNERS, INC.



Principal Place of Business
 240 S. PIINEAPPLE AVE.
 SARASOTA, FL 34236

Mailing Address
 240 S. PIINEAPPLE AVE.
~~393 S. TAMMIAMI TRAIL, STE. 100~~
 SARASOTA, FL 34236

50007920



2. Principal Place of Business
 Suite, Apt. #, etc.
 City & State
 Zip

3. Mailing Address
 Suite, Apt. #, etc.
 City & State
 Zip

01302006 Chg-NP CR2E037 (11/05)

4. FEI Number
 NOT APPLICABLE

Applied For
 Not Applicable

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

6. Name and Address of Current Registered Agent
 KORP, WILLIAM R
 240 S. PIINEAPPLE AVE.
 SARASOTA, FL 34236

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

Filing Fee is \$61.25 Due by May 1, 2006

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	DX FLESCH, ROBERT 240 S. PIINEAPPLE AVE. SARASOTA, FL 34236 <input type="checkbox"/> Delete	TITLE DP NAME STREET ADDRESS CITY-ST-ZIP	COULTER, ROBERT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 240 S. PINEAPPLE AVE, SARASOTA, FL 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DV MURPPHY, DAVE 240 S. PIINEAPPLE AVE. SARASOTA, FL 34236 <input checked="" type="checkbox"/> Delete	TITLE DV NAME STREET ADDRESS CITY-ST-ZIP	COCKERHAM, ALMA <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 240 S. PINEAPPLE AVE SARASOTA, FL. 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT SHISLER, JACK 240 S. PIINEAPPLE AVE.. SARASOTA, FL 34236 <input type="checkbox"/> Delete	TITLE DS NAME STREET ADDRESS CITY-ST-ZIP	LUSE, NANCY <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 240 S. PINEAPPLE AVE. SARASOTA, FL. 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SIMMERMAN, WILLIAM 240 S. PIINEAPPLE AVE. SARASOTA, FL 34236 <input checked="" type="checkbox"/> Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	ROSS, GILBERT <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 240 S. PINEAPPLE AVE. SARASOTA, FL. 34236
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS GEGLIO, ANTHONY 240 S. PIINEAPPLE AVE. SARASOTA, FL 34236 <input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HELLYER, GLEN 240 S. PIINEAPPLE AVE. SARASOTA, FL 34236 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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 all other like empowered.

SIGNATURE: JACK B. SHISLER *Jack B. Shisler* 3-31-06 941-798-3426
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #