

**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Jan 08, 2008**  
**Secretary of State**

DOCUMENT# N96000001326

Entity Name: CANTERBURY OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

5118 SYLVAN OAKS DR  
VALRICO, FL 33594 US

**New Principal Place of Business:**

**Current Mailing Address:**

7612 S. SHERRILL ST. / CHUCK SCOGIN  
TAMPA, FL 33616 US

**New Mailing Address:**

FEI Number: 59-3434835      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

SYNERGY REAL ESTATE & A.M.S. CHUCK SCOGIN  
7612 S. SHERRILL ST.  
TAMPA, FL 33616 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: PD ( ) Delete  
Name: HUGHES, RICK  
Address: 5118 SYLVAN OAKS DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: VD ( ) Delete  
Name: PUSATERI, JOE  
Address: 5118 SYLVAN OAKS DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: T ( ) Delete  
Name: FERRELL, LISA  
Address: 5118 SYLVAN OAKS DR  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Delete  
Name: THEUNG, DAVID  
Address: 5118 SYLVAN OAKS DR  
City-St-Zip: VALRICO, FL 33594

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: T (X) Change ( ) Addition  
Name: PUSATERI, JOE  
Address: 5118 SYLVAN OAKS DRIVE  
City-St-Zip: VALRICO, FL 33594

Title: S (X) Change ( ) Addition  
Name: PASIK, DAVID  
Address: 5118 SYLVAN OAKS DR  
City-St-Zip: VALRICO, FL 33594

Title: D (X) Change ( ) Addition  
Name: TAPPAN, CHRISTOPHER  
Address: 5118 SYLVAN OAKS DR  
City-St-Zip: VALRICO, FL 33594

Title: D ( ) Change (X) Addition  
Name: FERRELL, LISA  
Address: 5118 SYLVAN OAKS DR  
City-St-Zip: VALRICO, FL 33594

I hereby certify that the information supplied with this filing does not qualify for the exemption stated 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 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: CHARLES L. SCOGIN

RA

01/08/2008

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date