

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000002974

FILED
Apr 21, 2006
Secretary of State

Entity Name: CORY ESTATES PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

130 S. CORY DRIVE
EDGEWATER, FL 32141

New Principal Place of Business:

Current Mailing Address:

130 S. CORY DRIVE
EDGEWATER, FL 32141

New Mailing Address:

FEI Number: 59-3026383 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired (X)**

Name and Address of Current Registered Agent:

BURGESS, JOSEPH M
130 S. CORY DRIVE
EDGEWATER, FL 32141 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: KLISE, KEN
Address: 143 S CORY DR
City-St-Zip: EDGEWATER, FL 32141

Title: DV () Delete
Name: LAMB, GARY
Address: 150 S CORY DR
City-St-Zip: EDGEWATER, FL 32141

Title: SD () Delete
Name: BURGESS, JOSEPH
Address: 130 S. CORY DRIVE
City-St-Zip: EDGEWATER, FL 32141

Title: DT () Delete
Name: GROMOTKA, BARBARA J TREAS
Address: 120 S. CORY DRIVE
City-St-Zip: EDGEWATER, FL 32141

Title: D () Delete
Name: BLACKERBY, JOHN T
Address: 176 EAST CORY DRIVE
City-St-Zip: EDGEWATER, FL 321417224

Title: DT () Delete
Name: ASHTON, E K
Address: 152 S CORY DR
City-St-Zip: EDGEWATER, FL 32141

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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: JOSEPH M. BURGESS

SEC

04/21/2006

Electronic Signature of Signing Officer or Director

Date