

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 30, 2007 8:00 am
Secretary of State

03-30-2007 90139 033 ****61.25

DOCUMENT # N97000003272 1. Entity Name COUNTRYSIDE NORTH RESIDENTS ASSOCIATION, INC.					
Principal Place of Business 8775 - 20TH STREET #950 VERO BEACH, FL 32960				Mailing Address 8775 - 20TH STREET #950 VERO BEACH, FL 32966 US	
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number 65-0849281	
5. Certificate of Status Desired ☐				Applied For Not Applicable	
6. Name and Address of Current Registered Agent COLLING, LEE J ESQ 500 NORTH MAITLAND AVENUE SUITE 203 MAITLAND, FL 32751				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 _____ 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, 2007		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	P MATTINGLY, DORIS 8775 20TH ST., LOT 257 VERO BEACH, FL 32966	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DEBAGGIS, DONALD 8775 20TH ST - LOT 152 VERO BEACH, FL 32966	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP BLAIS, JEANNE 8775 20TH ST., LOT 38 VERO BEACH, FL 32966	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP MARTIN, JIM 8775 20TH ST - LOT 158 VERO BEACH, FL 32966	☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MESERVIE, MARTHA 8775 20TH ST., LOT 146 VERO BEACH, FL 32966	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D O'CONNOR, JOHN 8775 20TH ST., LOT 531 VERO BEACH, FL 32966	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T EWING, JOAN 8775 20TH ST., LOT 222 VERO BEACH, FL 32966	☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FISCHER, HARRY 8775 20TH ST - LOT 255 VERO BEACH, FL 32966	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRIETER, LORRAINE 8775 20TH ST., LOT 228 VERO BEACH, FL 32966	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REESE, ROBERT 8775 20TH ST., LOT 428 VERO BEACH, FL 32966	☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D DEBAGGIS, DONALD 8775 20TH ST., LOT 152 VERO BEACH, FL 32966	☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D VISCOTT, ALLEN 8775 20TH ST - LOT 243 VERO BEACH, FL 32966	☐ Change ☒ 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: <u>Countryside North Residents Assn Inc</u> _____ SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					
Date: <u>3/27/2007</u> Daytime Phone #: <u>772-562-0917</u>					