


2005 FOR PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 30, 2005 08:00 AM
Secretary of State

DOCUMENT # P00000032600
 1. Entity Name
 COLONY AT BARRAGAN RD, INC.



Principal Place of Business
 7255 BARRAGAN ROAD
 FORT MYERS, FL 33912

Mailing Address
 7255 BARRAGAN ROAD
 FORT MYERS, FL 33912

DO NOT WRITE IN THIS SPACE



04272005 No Chg-P CR2E034 (10/03)

4. FEI Number 65-1114826	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

SPIEGEL & UTRERA, P.A.
 343 ALMERIA AVENUE
 CORAL GABLES, FL 33134

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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 Joseph Twomey 4-27-05
Signature typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2005 Fee will be \$550.00

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTS TWOMEY, JOSEPH E 7255 BARRAGAN ROAD FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ST CHESPIN, SAMUEL 7255 BARRAGAN ROAD FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP TWOMEY, JOAN 7255 BARRAGAN ROAD FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP HANSEN, JACOB 7255 BARRAGAN ROAD FORT MYERS, FL 33912
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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 05/02/05-80049-011 150.00

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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 607, 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: Joseph Twomey JOSEPH TWOMEY 4-27-05 239 267-7637
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #