## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Feb 15, 2006 8:00 am Secretary of State **DOCUMENT # 766460** 1. Entity Name 02-15-2006 90047 050 \*\*\*\*61.25 CEDAR BEND PATIO-HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address THUTTOLD 1976 HICKORY RUN EAST ORANGE PARK FL 32073 1976 HICKORY RUN EAST **ORANGE PARK FL 32073** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State 4. FEI Number Applied For 59-2342711 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name JONES, TERRANCE A. Street Address (P.O. Box Number is Not Acceptable) 769 BLANDING BLVD. **ORANGE PARK FL 32065** 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 revistating) DATE FILE NOW: FEE IS \$61.25 Make Check Payable to 9. Election Campaign Financing **\$5.00** May Be Trust Fund Contribution. Due By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. DP TITLE ☐ Defete TITLE ☐ Change ■ Addition HAGER, VICTOR NAME NAME 1959HAZELNUT RUN E. STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP CITY-ST-ZIP VD TITLE ☐ Delete TITLE ☐ Change ☐ Addition AYMOND, KEN NAME NAME 1967 BLUEBIRD RUN W. STREET ADORESS STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE ☐ Change ■ Addition NAME HAVEY, MARTIN NAME STREET ADDRESS 1971 BIRCH RUN WEST STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP CITY-ST-ZIP Change TITLE DS Delete TITLE ☐ Addition ODOM, JUD' 1962 SWAL ODOM, JUDY NAME STREET ADDRESS 1962 SWALLOW RUN E. STREET ADDRESS CITY-ST-ZIP **ORANGE PARK FL 32073** CITY-ST-ZIP ☐ Addition TITLE ☐ Delete TITLE □ Change ACKERMAN, SUSANNE NAME NAME 1973 BLUEBIRD WEST STREET ADDRESS STREET ADDRESS **ORANGE PARK FL 32073** CITY-ST-ZIP CITY-ST-ZIP WALKER, JENNIFER 1958 SWALLOW RUN E Change TITLE ☐ Delete TITLE ☐ Addition WALKER, JENNIFER NAME NAME 1958 SWALLOW RUN W STREET ADDRESS STREET ADDRESS

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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.

CITY-ST-ZIP

**ORANGE PARK FL 32073** 

CITY-ST-ZIP

VICTOR HAGER

RANGE PARK FL 32073

FILED