

DOCUMENT # 700688

1. Entity Name
COTTAGE POINT RECREATIONAL ASSOCIATION, INC.



FILED
Apr 18, 2007 8:00 am
Secretary of State

04-18-2007 90160 040 ****61.25

Principal Place of Business
C/O DOROTHY W CANAN
13201 POINT BREEZE DR
FORT MYERS, FL 33908

Mailing Address
C/O DOROTHY W CANAN
13201 POINT BREEZE DR
FORT MYERS, FL 33908

40066733



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

04042007 Chq-NP CR2E037 (12/06)

City & State

City & State

4. FEI Number	Applied For
59-2349145	Not Applicable

Zip Country

Zip Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent**7. Name and Address of New Registered Agent**

CANAN, DOROTHY W
13201 POINT BREEZE DR
FT. MYERS, FL 33908

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 _____

Dorothy W. Canan
Signature, typed or printed name of registered agent and (if applicable):

(NOTE: Registered Agent signature required when reinstating)

DATE _____

Filing Fee is \$61.25
Due by May 1, 2007

9. Election Campaign Financing Trust Fund Contribution.

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE	P	Delete
NAME	BALLOU, MARY	
STREET ADDRESS	13181 PT BREEZE DR	
CITY-ST-ZIP	FORT MYERS, FL 33908	
TITLE	VP	Delete
NAME	LOWE, CAROLE	
STREET ADDRESS	16825 WINDCREST DR	
CITY-ST-ZIP	FORT MYERS, FL 33908	
TITLE	T	Delete
NAME	GRUSHON, HELEN	
STREET ADDRESS	13101 POINT BREEZE DR	
CITY-ST-ZIP	FT. MYERS, FL 33908	
TITLE	S	Delete
NAME	MOUNTAIN, MARCIA	
STREET ADDRESS	13141 PT BREEZE DR	
CITY-ST-ZIP	FORT MYERS, FL 33908	
TITLE	T	Delete
NAME	BUCK, ISABEL	
STREET ADDRESS	13191 PT BREEZE DR	
CITY-ST-ZIP	FORT MYERS, FL 33908	
TITLE	T	Delete
NAME	COOK-BANDY, DARLENE F	
STREET ADDRESS	13121 POINT BREEZE DR	
CITY-ST-ZIP	FT. MYERS, FL 33908	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE		Change
NAME		Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Change
NAME		Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Change
NAME		Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Change
NAME		Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		Change
NAME		Addition
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	TREASURER	Change
NAME	FURA, KENNETH C.	Addition
STREET ADDRESS	16841 WINDCREST DR.	
CITY-ST-ZIP	FORT MYERS, FL 33908	

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:

Signature and Typed or Printed Name of Signing Official

KENNETH C. FURA

Date _____

Daytime Phone #

4/16/2007 (239) 896-4705
Daytime Phone #