


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 05, 2006 8:00 am
Secretary of State

05-05-2006 90176 033 ****61.25

DOCUMENT # 728010	
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1. Entity Name
CURRY CREEK OWNERS ASSOCIATION, INC.

Principal Place of Business 1900 SETTLEMENT RD. VENICE, FL 34292	Mailing Address 1900 SETTLEMENT RD. VENICE, FL 34292
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04282006 No Chg-NP CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number 59-1822150	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

OSBORN, ARTHUR
1969 SETTLEMENT RD
VENICE, FL 34285

**DO NOT WRITE
IN THIS SPACE**

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 *Arthur R Osborn*

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

1-18-2006

**Filing Fee is \$61.25
Due by May 1, 2006**

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	PD OSBORN, ARTHUR R 1969 SETTLEMENT RD VENICE, FL 34285
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D JENSEN, JEREL 1973 SETTLEMENT RD. VENICE, FL 34285 <i>Julius GRIGORE 1946 SETTLEMENT RD VENICE, FL 34285</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD STUART, CARY 1962 SETTLEMENT RD VENICE, FL 34285 <i>CHARLES ESSELBURN 1905 SETTLEMENT RD VENICE, FL 34285</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V PIGORE, JULIUS G 408 VENEZIA VENICE, FL 34293 <i>JOHN WHITEHEAD 1950 SETTLEMENT RD. VENICE, FL 34285</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SAPUTO, GLORIA 1913 SETTLEMENT RD VENICE, FL 34285 <i>GARY BUDWAY 1953 SETTLEMENT RD. VENICE, FL 34285</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

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: *Arthur R Osborn* - **ARTHUR R OSBORN PRESIDENT** *4-26-06* *946-484-5619*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #