

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 728154

FILED
Apr 13, 2006
Secretary of State

Entity Name: COLONY BEACH & TENNIS CLUB ASSOCIATION, INC.

Current Principal Place of Business:

1620 GULF OF MEXICO DR.
LONGBOAT KEY, FL 34228

New Principal Place of Business:

Current Mailing Address:

ATTN: JODY NELSON-ACCOUNTING
1620 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228

New Mailing Address:

FEI Number: 59-1519496

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLAUBER, MURRAY J.
1620 GULF OF MEXICO DRIVE
LONGBOAT KEY, FL 34228 US

Name and Address of New Registered Agent:

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.

SIGNATURE:

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: ADAMS, ANDY
Address: 801 MOORELAND LANE
City-St-Zip: MURFREESBORO, TN 37128

Title: D () Delete
Name: ROSS, STUART
Address: 46 LAUREL HILL ROAD
City-St-Zip: EAST GREENWICH, RI 02818

Title: TD () Delete
Name: BANK, DAVID
Address: 4801 RESERVOIR RD
City-St-Zip: GENESEO, NY 14454

Title: D () Delete
Name: ZIZZA, SAL
Address: 1 GRACE SQUARE, 10TH FLOOR
City-St-Zip: NEW YORK, NY

Title: S () Delete
Name: JOHNSON, MARILYN
Address: 1000 LAKE SHORE PLAZA SUITE 40A
City-St-Zip: CHICAGO, IL 60611

Title: D () Delete
Name: GOLDWATER, RICHARD
Address: 11305 HIDDEN HOLLOW COURT
City-St-Zip: POTOMAC, MD 20854 CA

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
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City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: SAL ZIZZA

D

04/13/2006

Electronic Signature of Signing Officer or Director

Date