


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

pg 1 of 2

<b>DOCUMENT # 737335</b>		
1. Entity Name BREEZE HILL ASSOCIATION, INC.		

Principal Place of Business 360 BREEZE HILL LAKE WALES, FL 33898-7373 US	Mailing Address BEEZE HILL M.H.P., BOX 3-60 LAKE WALES, FL 33898-7373 US
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2. Principal Place of Business <i>3698 Breeze Way</i>	3. Mailing Address <i>3698 Breeze Way</i>
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State <i>LAKE WALES, FLORIDA</i>	City & State <i>LAKE WALES, FL.</i>
Zip <i>33898-7373</i>	Zip <i>33898-7373</i>
Country <i>POLK</i>	Country <i>POLK</i>

FILED  
06 JAN 25 PM 1:07  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA



01072006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-1999953	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent MCCLAIN, BARBARA C 317 BREEZE HILL LAKE WALES, FL 33898-7373	
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7. Name and Address of New Registered Agent Name <i>JERRY T. PECK</i> Street Address (P.O. Box Number is Not Acceptable) <i>8712 Breeze Hill DR.</i> City <i>LAKE WALES</i> FL Zip Code <i>33898</i>	
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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 <i>Jerry T. Peck</i> <i>JERRY T. PECK</i>	02/10/06--01022--002 **\$61.25 1-23-06

Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D JOHNSTON, ROGER 121 BREEZE HILL LAKE WALES, FL 33898 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D MCCLAIN, LARRY R 317 BREEZE HILL LAKE WALES, FL 33898 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S VUKICH, JOANN M 131 BREEZE HILL LAKE WALES, FL 33898 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T MCCLAIN, BARBARA C 317 BREEZE HILL LAKE WALES, FL 33898 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D COBERLY, REBECCA 206 BREEZE HILL LAKE WALES, FL 33898 <input checked="" type="checkbox"/> Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D PECK, JERRY 331 BREEZE HILL LAKE WALES, FL 33898 <input checked="" type="checkbox"/> Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES. RON LUTZ 8479 BREEZE Hill DR. LAKE WALES, FL 33898 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V. PRES. RICHARD ROUNDS 8664 BREEZE Hill DR. LAKE WALES, FL. <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S. DANA LUTZ, DARLA 8479 BREEZE Hill DR. LAKE WALES, FL 33898 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	J JERRY PECK 8712 BREEZE Hill DR. LAKE WALES, FL 33898 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D WALTER Schilg 8701 BREEZE Hill DR. LAKE WALES, FL 33898 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Louis Koloz 8574 BREEZE Hill DR LAKE WALES, FL 33898 <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition

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: <i>Ronald D Lutz</i> SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	1-22-06 863-686-4328 Date Daytime Phone #
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7. Name and Address of New Registered Agent Name <b>Jerry Peck</b> Street Address (P.O. Box Number is Not Acceptable) <b>8712 Breeze Hill DR.</b> City <b>LAKE WALES, FL</b> Zip Code <b>33898</b>					
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 <b>Jerry T. Peck</b> <i>[Signature]</i> <b>1-23-06</b> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>		<b>Make check payable to Florida Department of State</b>	
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SIGNATURE: <i>[Signature]</i> <b>1-22-06</b> <b>863-696-4328</b> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					