2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 10, 2006 8:00 am
Secretary of State
04-10-2006 90301 022 ****61.25

DOCUMENT # 740863

1. Entity Name
CARIBBEAN ISLES RESIDENTIAL PARK CIVIC ASSOCIATION, INC.

60026326

Principal Place of Business	Mailing Address
405 ELSBERRY RD APOLLO BEACH, FL 33572	405 ELSBERRY RD APOLLO BEACH, FL 33572

03272006 Chg-NP CR2E037 (11/05)

2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip / Country	Zip / Country

4. FEI Number 59-1994122 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

YARMUTH, DAVID
131 ST. ANNE'S CIR. E.
APOLLO BCH., FL 33572

7. Name and Address of New Registered Agent

Name: BRIDGIE BRELSFORD
Street Address (P.O. Box Number is Not Acceptable)
191 ST THOMAS CIR N.
City: APOLLO BEACH FL Zip Code: 33572

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 B Brelsford 4/6/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T HAMLIN, BILL 225 ST THOMAS CIR N APOLLO BEACH, 33572	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P BRIDGIE BRELSFORD 191 ST THOMAS CIR N. APOLLO BEACH FL 33572	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P YARMUTH, DAVID 131 ST. ANNE'S CIR. E APOLLO BEACH, FL 33572	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S MARY ANN SCHWERDTMANN 192 ART ROYAL LANE APOLLO BEACH FL 33572	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STAHL, NANCY 121 ST PIERRE'S WAY APOLLO BEACH, FL 33572	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP AMELIA MORAN 122 ST LUCIA LOOP W APOLLO BEACH FL 33572	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S REED, MARY 228 ST. GEORGE CIR. APOLLO BEACH, FL 33572	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT BARBARA WILLIAMS 136 ST THOMAS CIR S. APOLLO BEACH FL 33572	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	AT KINNAMAN, SHIRLEY 189 ST. THOMAS CIR. N. APOLLO BEACH, FL 33572	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NORBIE ZELLEN 188 ST THOMAS CIR N. APOLLO BEACH, FL 33572	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D SCHORR, JAMES 117 ST JOHN'S WAY E APOLLO BEACH, FL 33572	☑ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BETTY HOUGH 126 ST JOHN'S WAY W. APOLLO BEACH FL 33572	☐ Change ☑ 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: B B Brelsford 4/6/06 813-641-3152
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #