

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 740883

FILED  
Jan 28, 2009  
Secretary of State

**Entity Name:** CANOE COUNTRY HOMEOWNERS' ASSOCIATION, INC.

**Current Principal Place of Business:**

CR 251-B  
MAYO, FL 32066

**New Principal Place of Business:**

**Current Mailing Address:**

P.O. BOX 258  
MAYO, FL 32066 US

**New Mailing Address:**

**FEI Number:** 59-3171007

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

COULTHURST, BARBARA  
172 W MAIN ST  
MAYO, FL 32066 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: PD ( ) Delete  
Name: CLARK, DOTTIE  
Address: 150 NW NORTH WHITEWATER TRAIL  
City-St-Zip: MAYO, FL 32066

Title: S ( ) Delete  
Name: MOODY, SUSAN  
Address: 18930 GOOD TIMES DR.  
City-St-Zip: PERRY, FL 32348

Title: S ( ) Delete  
Name: GOODMAN, JOSH  
Address: 18930 GOODTIMES DR  
City-St-Zip: PERRY, FL 32348

Title: VP (X) Delete  
Name: HELM, JIM  
Address: 3650 OSAGE ST  
City-St-Zip: COCOA, FL 32926

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: PD (X) Change ( ) Addition  
Name: LENTZ, JUDY  
Address: 15805 BRENDA ST  
City-St-Zip: HUDSON, FL 34667

Title: S/T (X) Change ( ) Addition  
Name: STEPHENSON, ALAN  
Address: 291 NW S WHITEWATER TRAIL  
City-St-Zip: MAYO, FL 32066

Title: VP (X) Change ( ) Addition  
Name: HELM, JIM  
Address: 3650 OSAGE ST  
City-St-Zip: COCOA, FL 32926

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

I hereby certify that the information supplied with this filing does not qualify 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: ALAN STEPHENSON

S/T

01/28/2009

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date