2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 14, 2005 8:00 am
Secretary of State
03-14-2005 90093 042 ****61.25

DOCUMENT # 748268

1. Entity Name
COLONY COVE NORTH ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5 TAHITIAN DRIVE ELLENTON, FL 34222	5 TAHITIAN DRIVE ELLENTON, FL 34222

01252005 Chg-NP CR2E037 (10/03)

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 59-1922226 ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
NETTLES, GEORGE 116 GREAT OAKS WAY 5 TAHITIAN DRIVE ELLENTON, FL 34222	Name Street A D/VP BARBER, LEON 90 POMPANO DR City ELLENTON, FL 34222 FL Zip Code

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 Leon Barber 8 Mar 2005
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, 2005

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	D TENNENBAUM, LES 321 COLONY DR N ELLENTON, FL 34222	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P LYNN MERCER 467 COLONY DRIVE NORTH ELLENTON, FL 34222	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NETTLES, GEORGE E 5 TAHITIAN DR ELLENTON, FL 34222	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JOY ZUMMER 323 COLONY DRIVE NORTH ELLENTON, FL 34222	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D BARBER, LEON 90 POMPANO DR ELLENTON, FL 34222	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S RUTH HECK 88 POMPANO DRIVE ELLENTON, FL 34222	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D LOE, MARGO 527 MONTEGO LANE N ELLENTON, FL 34222	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HOLLOWAY, MARGO LOE 527 MONTEGO LANE N ELLENTON, FL 34222	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D HAIN, LEOLA 307 COLONY DRIVE N ELLENTON, FL 34222	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D RICHARD ZANI 425 SUNSET CIRCLE NORTH ELLENTON, FL 34222	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MAHONEY, MARGARET 407 SUNSET CIRCLE N ELLENTON, FL 34222	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D JAMES YARWOOD 190 POINCIANA DRIVE ELLENTON, FL 34222	☐ Change ☒ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Leon Barber Leon Barber 8 Mar 2005
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #