## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

## Jul 12, 2006 8:00 am Secretary of State **DOCUMENT #750283** 07-12-2006 90003 005 \*\*\*\*61 25 1. Entity Name COUNTRY CLUB VILLAS CONDOMINIUM ASSOCIATION, 5300 COLUMBUS WAY Principal Place of Business Mailing Address 2182 C CORINNE COURT SOUTH P.O. BOX 13091 ST. PETERSBURG, FL 33712 ST. PETERSBURG, FL 33733 2. Principal Place of Business 3. Mailing Address 5300 COLUMBUS WA Suite, Apt. #, etc. Suite, Apt. #, etc. 07032006 Cha-NP CR2E037 (4/06) City & State City & State 4. FEI Number 59-1965746 Applied For Not Applicable Zip Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent CHRISTINE HOWADLE KOURY, MARIE Street Address (P.O. Box Number, is Not Acceptable) 2182-C CORINNE COURT SOUTH ST. PETERSBURG, FL 33712 ST. PETERS BURG 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 CHRISTINE HOWADLE Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Florida Department of State Trust Fund Contribution Due by September 6, 2006 Added to Fees ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 ○ OFFICERS AND DIRECTORS 10. 11. BROWN, FLOYD E CT SOUTH Delete TITLE TITLE NAME GONZALEZ, JUSTO I NAME STREET ADORESS 2176- B CORINNE CT SOUTH STREET ADDRESS SAINT PETERSBURGIFL 33712 SAINT PETERSBURG, FL 33712 CITY-ST-ZIP City-St-ZP TITI F X Delete ELOISE COTMAN 2213-C COAINNE CT SOUTH NAME BROWN, FLOYD NAME 2187-B CORINNE CT SOUTH STREET ADDRESS STREET ADORESS SAINT PETERS BURG, FL 33712 CITY-ST-ZIP SAINT PETERSBURG, FL 33712 CITY-ST-ZIP Addition TITLE Delete KIRK BARKER KAHLER, THOMAS NAME NAME 2176-A CORINNE CT SOUTH STREET ADORESS 2188- A CORINNE CT SOUTH STREET ADDRESS SAINT PETERSBURG, FL 33712 SAINT PETERSBURG, FL 33712 CTTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ■ Addition DIXON, FRANK NAME NAME STREET ADORESS 2188-B CORINNE COURT SOUTH STREET ADDRESS SAINT PETERSBURG, FL 33712 CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition TITLE TITE KOURY, MARIE NAME NAME 2182-C CORINNE COURT SOUTH STREET ADORESS STREET ADDRESS CITY-ST-ZIP ST. PETERSBURG, FL 33712 CITY-ST-ZIP ☐ Change ☐ Addition D Delete TITLE TITLE NAPIER, ALVIN 2188-C CORINNE CT SOUTH STREET ADDRESS STREET ADDRESS SAINT PETERSBURG, FL 33712 CITY-ST-ZIP 12. Thereby certify that the information supplied with this filling 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 this empowered.

SIGNATURE SÃO TYPED OR PRINTED NAME OF BIONEMA OFFICER OR DIRECTOR

SIGNATURE:

FILED