

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 759972

FILED
Apr 28, 2005
Secretary of State

Entity Name: COBB ACRES HOMEOWNERS ASSOCIATION INCORPORATED

Current Principal Place of Business:

2848 COBBLESTONE DRIVE
PALM HARBOR, FL 34684 US

New Principal Place of Business:

Current Mailing Address:

2848 COBBLESTONE DRIVE
PALM HARBOR, FL 34684

New Mailing Address:

FEI Number: 59-2577296

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

MERWE, SAREL VAN D
2848 COBBLESTONE DRIVE
PALM HARBOR, FL 34684 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: VPDT () Delete
Name: WILLISIE, JAMES
Address: 2837 FOX SQUIRREL DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: PD () Delete
Name: VAN DER MERWE, SAREL
Address: 2848 COBBLESTONE DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: MITCHELL, PAUL
Address: 2853 COBBLESTONE DRIVE
City-St-Zip: PALM HARBOR, FL 34684

Title: D () Delete
Name: SIEWRUK, JOSEPH
Address: 2860 COBBLESTONE DRIVE
City-St-Zip: PALM HARBOR, FL 34684

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

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

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

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

I hereby certify that the information supplied with this filing does not qualify for the 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 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: SAREL D VAN DER MERWE

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04/28/2005

Electronic Signature of Signing Officer or Director

Date