

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 762617

FILED  
Mar 31, 2009  
Secretary of State

**Entity Name:** COUNTRY CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

7932 WILES ROAD  
CORAL SPRINGS, FL 33075 US

**New Principal Place of Business:**

**Current Mailing Address:**

7932 WILES ROAD  
CORAL SPRINGS, FL 33075 US

**New Mailing Address:**

**FEI Number:** 59-2191463

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

ROBERT KAYE & ASSOCIATES.  
6261 NW 6 WAY, SUITE 103  
FORT LAUDERDALE, FL 33309 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: DP ( ) Delete  
Name: HARP, CHERYL  
Address: 3204 NW 108 TERR  
City-St-Zip: POMPANO BEACH, FL 33065

Title: TD ( ) Delete  
Name: SUAREZ, LEWIS  
Address: PO BOX 772442  
City-St-Zip: CORAL SPRINGS, FL 33077

Title: S ( ) Delete  
Name: HARLEY, LESLIE  
Address: 3216 103RD TERR, B201  
City-St-Zip: CORAL SPRINGS, FL 33065

**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:

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: CHERYL HARP

P

03/31/2009

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

\_\_\_\_\_  
Date