

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
Feb 03, 2006
Secretary of State**

DOCUMENT# 762867

Entity Name: COACH RESIDENTS, INC.

Current Principal Place of Business:

4907 28TH AVNEUE EAST
COACH HOUSE
PALMETTO, FL 34221 US

New Principal Place of Business:

Current Mailing Address:

4907 28TH AVNEUE EAST
COACH HOUSE
PALMETTO, FL 34221 US

New Mailing Address:

FEI Number: 59-2187833 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()

Name and Address of Current Registered Agent:

KLOCK, MARY JO C TD
84 LARKSPUR
PALMETTO, FL 34221 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: D () Delete
Name: FRIEDHABER, GEORGE
Address: 46 NURIUM
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: LEADER, CALVIN
Address: 15 GOLF
City-St-Zip: PALMETTO, FL 34221

Title: PD () Delete
Name: BACON, ROBERT
Address: 2 HAVEN
City-St-Zip: PALMETTO, FL 34221

Title: D () Delete
Name: LOKER, DARRYL
Address: 29 CENTER RD.
City-St-Zip: PALMETTO, FL 34221

Title: SD () Delete
Name: HARDIN, LINDA
Address: 7 EVERGREEN
City-St-Zip: PALMETTO, FL 34221

Title: VD () Delete
Name: CUNNINHAM, WAYNE
Address: 2 KINGSPORT
City-St-Zip: PALMETTO, FL 34221

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: D (X) Change () Addition
Name: GROVE, RON
Address: 30 LAKEVIEW
City-St-Zip: PALMETTO, FL 34221

Title: D (X) Change () Addition
Name: WILFONG, GLORIA
Address: 2 WEST RD.
City-St-Zip: PALMETTO, FL 34221

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 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: MARY JO KLOCK

TD

02/03/2006

Electronic Signature of Signing Officer or Director

Date