


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 23, 2006 8:00 am
Secretary of State

01-23-2006 90047 026 ****61.25

DOCUMENT # 763176 1. Entity Name CRAYTON ROAD ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 396 NAPLES, FL 33940			Mailing Address P.O. BOX 396 NAPLES, FL 33940		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		Zip	
Country		Country		4. FEI Number 65-0032956	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent HAYES, LINDA 607 BINNACLE DR. NAPLES, FL 34103				7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City	
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.				5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
SIGNATURE _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State		10. OFFICERS AND DIRECTORS			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D BRISKEY, DODIE <input checked="" type="checkbox"/> Delete 3848 CRAYTON RD NAPLES, FL 34108				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD HABERMAN, SANDY <input type="checkbox"/> Delete 3868 CRAYTON RD. NAPLES, FL 34103				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DS NEWMAN, VIRGINIA <input type="checkbox"/> Delete 3150 CRAYTON ROAD NAPLES, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D LUCKHART, ELAINE <input type="checkbox"/> Delete 3500 CRAYTON ROAD NAPLES, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KALMANS, AMY <input type="checkbox"/> Delete 2100 CRAYTON ROAD NAPLES, FL				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DT HAYES, LINDA <input type="checkbox"/> Delete 607 BINNACLE DR. NAPLES, FL 34103				
11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Smith, Gary <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 4217 Crayton Rd. NAPLES, FL 34103				
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HABERMAN, SANDY <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition →				
12. I hereby certify that the information supplied with this filing 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 like empowered.					
SIGNATURE: _____ <i>Ymichal...</i> 1/16/06 239-404-0681 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					