

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 01, 2006 8:00 am
Secretary of State

05-01-2006 90475 044 ****61.25

DOCUMENT # 766742

1. Entity Name
PANTHER WOODS LOT OWNERS ASSOCIATION, INC.



Principal Place of Business
**ELLIOTT MERRILL COMM MGMT
835 20TH PLACE
VERO BEACH, FL 32960 US**

Mailing Address
**ELLIOTT MERRILL COMM MGMT
835 20TH PLACE
VERO BEACH, FL 32960 US**

50017507



2. Principal Place of Business
3240 CARDINAL DR.
Suite, Apt. #, etc.

3. Mailing Address
Suite, Apt. #, etc.

04192006 Chg-NP CR2E037 (11/05)

City & State
VERO BEACH, FL
Zip
32963 Country

City & State
City & State
Zip Country

4. FEI Number
65-0138687 Applied For
Not Applicable

5. Certificate of Status Desired ☐ **\$8.75** Additional
Fee Required

6. Name and Address of Current Registered Agent

**MERRILL, CRAIG (ELLIOTT
ELLIOTT MERRILL COMM. MGT
835 20TH PLACE
VERO BEACH, FL 32960**

7. Name and Address of New Registered Agent

Name
MICHELLE TURNER
Street Address (P.O. Box Number is Not Acceptable)
3240 CARDINAL DR.
City
VERO BEACH FL Zip Code

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 **Michelle Turner, C.A.M.**
Signature, typed or printed name of registered agent and title if applicable.

4/21/06
DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	PO #P	<input type="checkbox"/> Delete
NAME	BRUCKER, JAMES	
STREET ADDRESS	9436 POINCIANA COURT	
CITY-ST-ZIP	FORT PIERCE, FL 34951	
TITLE	VPO Director	<input type="checkbox"/> Delete
NAME	FORD, LENORE	
STREET ADDRESS	9408 MEADOWWOOD DRIVE	
CITY-ST-ZIP	FORT PIERCE, FL 34951	
TITLE	S	<input checked="" type="checkbox"/> Delete
NAME	NELSON, HORACE	
STREET ADDRESS	9526 LAURELWOOD COURT	
CITY-ST-ZIP	FORT PIERCE, FL 34951	
TITLE	TD	<input checked="" type="checkbox"/> Delete
NAME	CHARBONEAU, BRIAN	
STREET ADDRESS	9416 BUNDING LANE	
CITY-ST-ZIP	FORT PIERCE, FL 34951	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	WROE, KEN	
STREET ADDRESS	9413 PINEBARK COURT	
CITY-ST-ZIP	FORT PIERCE, FL 34951	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	#P	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Director	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	Felix Denmon VP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3409 Bent Pine Dr.	
STREET ADDRESS	Fort Pierce, FL 34951	
CITY-ST-ZIP		
TITLE	Paul Heinz Sec.	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	2631 CONIFER DR.	
STREET ADDRESS	FT. PIERCE, FL 34951	
CITY-ST-ZIP		
TITLE	H. Josef Ufner D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	9409 Poinciana Ct	
STREET ADDRESS	Fort Pierce, FL 34951	
CITY-ST-ZIP		
TITLE	J.W. Gaines T	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	9528 Laurelwood Ct.	
STREET ADDRESS	Fort Pierce, FL 34951	
CITY-ST-ZIP		

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JAMES BRUCKER

Date

4/21/06

Daytime Phone #

772-359-5705