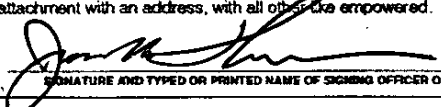


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 20, 2005 8:00 am
Secretary of State

01-20-2005 90024 035 ****61.25

DOCUMENT # 767177 1. Entity Name COUNTRY OAKS PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 4541 SW 46TH ST OCALA, FL 34474-4354 US			Mailing Address 4541 SW 46TH ST OCALA, FL 34474-4354 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
4. FBI Number 59-3099994			Applied For ☐ Not Applicable		
5. Certificate of Status Desired ☐			\$8.75 Additional Fee Required		
6. Name and Address of Current Registered Agent FRAZIER, MILTON 4541 SW 46TH ST OCALA, FL 34474			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code		
8. I 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)					
Filing Fee is \$61.25 Due by May 1, 2005		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FRAZIER, MILTON 4541 SW 46TH STREET OCALA, FL 344744354		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD Jim Thomason 4621 SW 44th COURT OCALA, FL 34474-9220	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD SHARP, DAVID 4555 SW 44TH COURT OCALA, FL 344744348		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD Bill COONES 4525 SW 44th COURT OCALA, FL 34474-9218	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARTIN, RUTH 4571 SW 46TH AVENUE OCALA, FL 34474		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD MARY Kay PRICE 4401 SW 44th LANE OCALA, FL 34474-9490	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD HETRICK, ELIZABETH 4581 SW 44TH LANE OCALA, FL 344749221		TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD ROBERTA C. Bulger 4575 SW 44th COURT OCALA, FL 34474	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition	
12. I hereby certify that the information supplied with this filing does not qualify 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 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: 			Jim Thomason - PRESIDENT 352-854-9191 1-15-05		