

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Mar 27, 2006 8:00 am**  
**Secretary of State**

03-27-2006 90239 001 \*\*\*\*61.25

**DOCUMENT # N00000008267**

1. Entity Name  
COUNTRY PARK CO-OP, INC.



Principal Place of Business  
2331 BELLEAIR ROAD  
CLEARWATER, FL 33546

Mailing Address  
2331 BELLEAIR ROAD  
CLEARWATER, FL 33546

2. Principal Place of Business  
10730 U. S. 19

3. Mailing Address  
10730 U.S. 19

Suite, Apt. #, etc.  
Suite 17

Suite, Apt. #, etc.  
Suite 17

City & State  
Port Richey, FL

City & State  
Port Richey, FL

Zip  
34668

Country  
Pasco

Zip  
34668

Country  
Pasco

01062006 Chg-NP CR2E037 (11/05)

4. FEI Number  
59-3688202

Applied For  
Not Applicable

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

## 6. Name and Address of Current Registered Agent

ERDMAN, JJ  
696 1ST AVE N  
SUITE #102  
ST. PETERSBURG, FL 33701

## 7. Name and Address of New Registered Agent

Name  
Qualified Property Management, Inc.  
Street Address (P.O. Box Number is Not Acceptable)  
10730 U. S. 19  
Suite 17  
City  
Port Richey FL Zip Code  
34668

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

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	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete
PD	MORRIS, JACK	2331 BELLEAIR RD LOT #707	CLEARWATER, FL 33764	<input type="checkbox"/>
VP	LEROY, DIBBLE	2331 BELLEAIR RD LOT #902	CLEARWATER, FL 33764	<input type="checkbox"/>
SD	HUNTER, NORM	2331 BELLEAIR RD LOT #906	CLEARWATER, FL 33764	<input type="checkbox"/>
TD	RATH, PAT	2331 BELLEAIR RD LOT #907	CLEARWATER, FL 33764	<input type="checkbox"/>
----	BANGS, CORA	2331 BELLEAIR RD LOT #472	CLEARWATER, FL 33764	<input type="checkbox"/>
TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> Delete

## 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
PD	Morris, Jack	10730 U.S. 19, Suite 17	Port Richey, FL	<input checked="" type="checkbox"/>
VP	LeRoy, Dibble	10730 U.S. 19, suite 17	Port Richey, FL	<input checked="" type="checkbox"/>
SD	Hunter, Norm	10730 U.S. 19, Suite 17	Port Richey, FL	<input checked="" type="checkbox"/>
TD	Rath, Pat	10730 U.S. 19, Suite 17	Port Richey, FL	<input checked="" type="checkbox"/>
D	Bangs, Cora	10730 U.S. 19, Suite 17	Port Richey, FL	<input checked="" type="checkbox"/>
TITLE	NAME	STREET ADDRESS <td>CITY - ST - ZIP</td> <td><input type="checkbox"/> Change <input type="checkbox"/> Addition</td>	CITY - ST - ZIP	<input 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #