## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N01000003594

FILED Mar 07, 2006 Secretary of State

Entity Name: THE GILCHRIS PROPERTY OWNERS ASSOCIATION, INC.

**Current Principal Place of Business: New Principal Place of Business:** 

2400 SE FEDERAL HIGHWAY 2005 W. CYPRESS CREEK ROAD STUART, FL 34994

202

FT. LAUDERDALE, FL 33309

**Current Mailing Address: New Mailing Address:** 

C/O COLONY REALTY 6939 19 MILE ROAD

12230 FOREST HILL BLVD, SUITE 101 STERLING HEIGHTS, MI 48314

WELLINGTON, FL 33414

FEI Number: 43-2010622 FEI Number Applied For ( ) FEI Number Not Applicable ( ) Certificate of Status Desired ( )

Name and Address of New Registered Agent: Name and Address of Current Registered Agent:

MCCARTHY, TERENCE P BUTTERS, SAMUEL 2400 SE FEDERAL HIGHWAY 2005 W. CYPRESS CREEK ROAD STUART, FL 34994

FT. LAUDERDALE, FL 33309 US

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: SAMUEL BUTTERS 03/07/2006

Electronic Signature of Registered Agent Date

## **OFFICERS AND DIRECTORS:**

## ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

() Delete (X) Change ( ) Addition

WRIGHT, WILLIAM JANKOWSKI, PAUL C Name: Name: 12230 FOREST HILL BLVD, SUITE 101 Address: 6939 19 MILE ROAD Address:

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: STERLING HEIGHTS, MI 48314

Title: DPST () Delete Title: (X) Change ( ) Addition

Name: ELLIOT, RICHARD Name: JANKOWSKI, LISA M Address: 13150 DOUBLE TREE CIR Address: 6939 19 MILE ROAD

City-St-Zip: WELINGTON, FL 33414 City-St-Zip: STERLING HEIGHTS, MI 48314

Title: () Delete Title: (X) Change ( ) Addition

WRIGHT, WILLIAM Name: BUTTERS, SAMUEL Name:

2005 W. CYPRESS CREEK ROAD, SUITE 202 12230 FOREST HILL BLVD., SUITE 101 Address: Address:

City-St-Zip: WELLINGTON, FL 33414 City-St-Zip: FT. LAUDERDALE, FL 33309

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: LISA M. JANKOWSKI ST 03/07/2006