

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 04, 2007 8:00 am
Secretary of State

04-04-2007 90185 047 ****61.25

DOCUMENT # N01296

1. Entity Name

C.A.V. HOMEOWNERS COOPERATIVE, INC.



Principal Place of Business

Mailing Address

39333 BLUE SKYE DRIVE
ZEPHYRHILLS FL 33542

39333 BLUE SKYE DRIVE
ZEPHYRHILLS FL 33542

2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2515418

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

CROSBY, RONALD E CP
6230 QUALITY LN
ZEPHYRHILLS FL 33542

Name

P DONALD MCDANIEL

Street Address (P.O. Box Number is Not Acceptable)

39248 DONIGIAN DR.

City

ZEPHYRHILLS

FL

Zip Code
33542

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

Donald McDaniel
(NOTE: Registered Agent signature required when reinstating)

3/21/2007
DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

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

NAME: VP ☒ Delete NAME: MCDANIEL, DON STREET ADDRESS: 39248 MAHER DR. CITY ST ZIP: ZEPHYRHILLS FL 33542	NAME: P ☒ Change ☐ Addition NAME: Donald McDaniel STREET ADDRESS: 39248 Donigian Dr. CITY ST ZIP: Zephyrhills, FL. 33542
NAME: P ☒ Delete NAME: CROSBY, RONALD STREET ADDRESS: 39248 MAHER RD CITY ST ZIP: ZEPHYRHILLS FL 33540	NAME: VP ☐ Change ☒ Addition NAME: James Penoyer STREET ADDRESS: 39325 Nanian Dr. CITY ST ZIP: Zephyrhills, FL. 33542
NAME: S ☐ Delete NAME: JOHNSTONE, LEELAND E STREET ADDRESS: 6231 BALMY LN CITY ST ZIP: ZEPHYRHILLS FL 33540	NAME: T ☐ Change ☒ Addition NAME: Harris Cohen STREET ADDRESS: 6336 Quality Ln. CITY ST ZIP: Zephyrhills, FL. 33542
NAME: D ☐ Delete NAME: KINSMAN, CONSTANCE STREET ADDRESS: 6253 WATERFRONT LANE CITY ST ZIP: ZEPHYRHILLS FL 33542	NAME: D ☐ Change ☒ Addition NAME: Arthur Beaver STREET ADDRESS: 39320 Donigian Dr. CITY ST ZIP: Zephyrhills, FL. 33542
NAME: T ☒ Delete NAME: BURLEY, EVELYN STREET ADDRESS: 6235 PLEASURE LANE CITY ST ZIP: ZEPHYRHILLS FL 33540	NAME: ☐ Change ☐ Addition NAME: STREET ADDRESS: CITY ST ZIP:
NAME: D ☐ Delete NAME: STREETER, NELSON STREET ADDRESS: 6239 PARKSEND LANE CITY ST ZIP: ZEPHYRHILLS FL 33540	NAME: ☐ Change ☐ Addition NAME: STREET ADDRESS: CITY ST ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: Donald McDaniel Donald McDaniel 3/21/07 (813) 782-8270
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #