

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90122 004 ****61.25

DOCUMENT # N01537

1. Entity Name

THE GLENS AT COUNTRY CREEK, INC.



Principal Place of Business

4962 N PALM AVENUE
WINTER PARK FL 32792
US

Mailing Address

P.O. BOX 677307
ORLANDO FL 32867-7307
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2921481

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

1st MOORE

CR2E037 (10/05)

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

FRASCA, JOSEPH
C/O PREFERRFD COMMUNITY MGMT, INC.
4962 N PALM AVENUE
WINTER PARK FL 32792

Name

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

City

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: 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 STD ☐ Delete
NAME TETRO, ERNEST
STREET ADDRESS 1232 BENT OAK TRAIL
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE PD ☐ Delete
NAME WOODROW, ROBERT K
STREET ADDRESS 1253 LEATHERWOOD DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE VP ☐ Delete
NAME BARTOLI, JAMES
STREET ADDRESS 1251 LEATHERWOOD DR
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE D ☐ Delete
NAME HENDERSON, JAYNE
STREET ADDRESS 1273 LEATHERWOOD DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE D ☐ Delete
NAME STOUTE, JAMES
STREET ADDRESS 1252 LEATHERWOOD DR
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

TITLE D ☒ Delete
NAME GREENE, DANIEL
STREET ADDRESS 1265 LEATHERWOOD DRIVE
CITY-ST-ZIP ALTAMONTE SPRINGS FL 32714

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D ☐ Change ☒ Addition
NAME Ortigao, Rosario
STREET ADDRESS 1257 Quail Walk Drive
CITY-ST-ZIP Altamonte Springs, FL 32714

TITLE D ☐ Change ☒ Addition
NAME Yovaish, Douglas
STREET ADDRESS 1264 Leatherwood Drive
CITY-ST-ZIP Altamonte Springs, FL 32714

TITLE D ☐ Change ☒ Addition
NAME Garcia, Frank
STREET ADDRESS 1249 Leatherwood Drive
CITY-ST-ZIP Altamonte Springs, FL 32714

TITLE D ☐ Change ☒ Addition
NAME Blackmon, Gary
STREET ADDRESS 1261 Quail Walk Drive
CITY-ST-ZIP Altamonte Springs, FL 32714

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ 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:

Robert K. Kula
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/21/06

407-297-8053