

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N01679

FILED
Jan 16, 2006
Secretary of State

Entity Name: CARROLLWOOD OAKS PROPERTY OWNERS ASSOCIATION, INC.

Current Principal Place of Business:

ANDOVER PROPERTIES
8601 4TH STREET NORTH, SUITE 305C
ST. PETERSBURG, FL 33702 US

New Principal Place of Business:

Current Mailing Address:

ANDOVER PROPERTIES
8601 4TH STREET NORTH, SUITE 305C
ST. PETERSBURG, FL 33702 US

New Mailing Address:

FEI Number: 59-2982564

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

ANDOVER PROPERTIES
8601 4TH STREET NORTH, SUITE
305C
ST. PETERSBURG, FL 33702 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: D () Delete
Name: MILLAS, KARIN
Address: 10057 LAKE OAK CIR
City-St-Zip: TAMPA, FL 33624

Title: D () Delete
Name: DALY, JOAN
Address: 13612 S VILLAGE DR #101
City-St-Zip: TAMPA, FL 33624

Title: SD () Delete
Name: NELSON, CHERYL
Address: 10051 LAKE OAK CR
City-St-Zip: TAMPA, FL 33624

Title: TD () Delete
Name: MURILLO, MICHAEL
Address: 10135 LAKE OAK CIRCLE
City-St-Zip: TAMPA, FL 33624

Title: PD () Delete
Name: DETLOFF, TIMOTHY
Address: 10014 LAKE OAK CIRCLE
City-St-Zip: TAMPA, FL 33624

Title: VPD () Delete
Name: MCCORMICK, SHARON
Address: 10009 LAKE OAK CIRCLE
City-St-Zip: TAMPA, FL 33624

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: S (X) Change () Addition
Name: DZIAGWA, SUSAN
Address: 10018 LAKE OAK CIRCLE
City-St-Zip: TAMPA, FL 33624

Title: VP (X) Change () Addition
Name: NELSON, CHERYL
Address: 10051 LAKE OAK CR
City-St-Zip: TAMPA, FL 33624

Title: T (X) Change () Addition
Name: MURILLO, MICHAEL
Address: 10135 LAKE OAK CIRCLE
City-St-Zip: TAMPA, FL 33624

Title: P (X) Change () Addition
Name: DETLOFF, TIMOTHY
Address: 10014 LAKE OAK CIRCLE
City-St-Zip: TAMPA, FL 33624

Title: D (X) Change () Addition
Name: MCCORMICK, SHARON
Address: 10009 LAKE OAK CIRCLE
City-St-Zip: TAMPA, FL 33624

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: TIM E. PRICE

AGEN

01/16/2006

Electronic Signature of Signing Officer or Director

_____ Date