

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N04000006837

FILED  
Feb 16, 2006  
Secretary of State

**Entity Name:** CRANES LANDING OF DELTONA HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

396 MITNIK DR  
DELTONA, FL 32738

**New Principal Place of Business:**

450 MITNIK DR  
DELTONA, FL 32738

**Current Mailing Address:**

396 MITNIK DR  
DELTONA, FL 32738

**New Mailing Address:**

450 MITNIK DR  
DELTONA, FL 32738

**FEI Number:**

**FEI Number Applied For ( )**

**FEI Number Not Applicable (X)**

**Certificate of Status Desired ( )**

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

FOLDS, DON  
396 MITNIK DR  
DELTONA, FL 32738 US

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

FOLDS, DON  
450 MITNIK DR  
DELTONA, FL 32738 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:

02/16/2006

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: FOLDS, DON  
Address: 450 MITNIK DR  
City-St-Zip: DELTONA, FL 32738

Title: V ( ) Delete  
Name: VAN ORDEN, GENE  
Address: 440 MITNIK DR  
City-St-Zip: DELTONA, FL 32738

Title: S ( ) Delete  
Name: MATHER, ANDREA  
Address: 435 MITNIK DR  
City-St-Zip: DELTONA, FL 32738

Title: T ( ) Delete  
Name: CREECH, CAROLYN  
Address: 396 MITNIK DR  
City-St-Zip: DELTONA, FL 32738

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

Title: V (X) Change ( ) Addition  
Name: SELKREGG, ANDY  
Address: 1775 S. LORRAINE DRIVE  
City-St-Zip: DELTONA, FL 32725

Title: S (X) Change ( ) Addition  
Name: BOYLE, JEFF  
Address: 621 LOCUST CT  
City-St-Zip: WINTER SPRINGS, FL 32708

Title: T (X) Change ( ) Addition  
Name: ARI, MARRON  
Address: 510 WIPPOORWILL HILL LANE  
City-St-Zip: DELTONA, FL 32738

Title: V ( ) Change (X) Addition  
Name: CREECH, SHADIE  
Address: 1215 GREENWOOD STREET  
City-St-Zip: ORLANDO, FL 32801

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: DON FOLDS

P

02/16/2006

Electronic Signature of Signing Officer or Director

Date