2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 13, 2006 8:00 am Secretary of State

DOCUMENT # N0500000040 1. Entity Name PENZANCE ESTATES HOMEOWNERS' ASSOCIATION, INC.				03-13-2006 9	90062 028 ****61	.25
9001 DANIELS PARKWAY SUITE 200 9001	g Address DANIELS PARKWAY S YERS, FL 33912	Suite 200				
Principal Place of Business 3. Mailing Address 4501 Tamiami Tr. No. 4501 Tamiami Tr. No.			UD III			
Suite 300 Su	ite, Apt. #, etc. WHE 300		02282006	Chg-NP	CR2E037 (11/05)	
Naples, FL No	y & State Uples, FL	· · · · · · · · · · · · · · · · · · ·	4. FEI Numbe	r ·	/ 7	Applicable
Zip Country Zip 34103 -USA 34		Country ムSA	5. Certificate of	of Status Desired	\$8.75 Addi	
6. Name and Address of Current Registere	d Agent	Namo	7. Name and	Address of New Ro	egistered Agent	-
R&A AGENTS INC			ock Community Services			
2320 1ST STREET SUITE 1000 FT MYERS, FL 33901			Street Address (P.O. Box Number is Not Acceptable) 4501 Tamiam Trail North			
		City 1	ite 300		■■ Zip Code	
		100	ules		FL 3410	23
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, hyped or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE						
Filing Fee is \$61.25 Due by May 1, 2006 9. Election Campaign Trust Fund Contrib						
		aign Financing	\$5.00 May Be Added to Fees	Flori	ake check payable to ida Department of Sta	ate
Due by May 1, 2006 10. OFFICERS AND DIRECTORS	Trust Fund Cont	aign Financing tribution.	\$5.00 May Be Added to Fees	Flori	ida Department of Sta	10
Due by May 1, 2006	Trust Fund Cont	aign Financing tribution.	\$5.00 May Be Added to Fees ADDITIONS/CHA	Flori	ida Department of Sta RS AND DIRECTORS IN Change	10 Addition
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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.

James & Chechenger Valerie Schechinger 2/28/06 239-2619232 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR