

FILED
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Secretary of State

04-30-2007 90426 001 ****61.25

2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT

DOCUMENT # N06000003637			
1. Entity Name BUCKS RUN RESERVE PROPERTY OWNERS' ASSOCIATION, INC.			
Principal Place of Business 3785 AIRPORT RD N STE B-1 NAPLES, FL 34105		Mailing Address 3785 AIRPORT RD N STE B-1 NAPLES, FL 34105	
2. Principal Place of Business - No P.O. Box # 3775 Airport Rd N		3. Mailing Address 3775 Airport Rd N	
State, Apt. #, etc. Ste B		State, Apt. #, etc. Ste B	
City & State Naples Florida		City & State Naples Florida	
Zip 34105		Zip 34105	
Country USA		Country USA	
4. FEI Number 26-0286004		Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent HOOVER, WILLIAM L 3785 AIRPORT RD N STE B-1 NAPLES, FL 34105		7. Name and Address of New Registered Agent Name Hoover William L Street Address (P.O. Box Number is Not Acceptable) 3775 Airport Rd N City, State, Zip Ste B FL 34105	
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 <u>William L Hoover</u> William L Hoover, P 4-27-07 (NOTE: Registered Agent signature required when in existence) DATE			
Filing Fee is \$61.25 Due by May 1, 2007		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DP HOOVER, WILLIAM L 5690 WAX MYRTLE WAY NAPLES, FL 34109 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DT HOOVER, CHARLENE S 5690 WAX MYRTLE WAY NAPLES, FL 34109 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	DS STERK, JEREMY 2875 GARLAND RD NAPLES, FL 34117 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	V MINOR, Q. GRADY 3785 AIRPORT RD N STE B-1 NAPLES, FL 34105 ☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☒ Change ☐ Addition Minor Q. Grady 3775 Airport Rd N Ste B Naples Florida 34105
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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: <u>William L Hoover</u> William L Hoover, P 4-27-07 239-403-8899 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #			