


**2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 30, 2007 8:00 am**  
**Secretary of State**

04-30-2007 90478 044 \*\*\*\*61.25

<b>DOCUMENT # N06275</b>					
1. Entity Name <b>COBBLE STONE HOMEOWNERS ASSOCIATION, INC.</b>					
Principal Place of Business <b>4339 COBBLESTONE COURT ORLANDO, FL 32810</b>			Mailing Address <b>P. O. BOX 608415 ORLANDO, FL 32860 US</b>		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country	4. FEI Number <b>59-2588023</b>	
5. Certificate of Status Desired <input type="checkbox"/>				Applied For <input type="checkbox"/> Not Applicable	
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
<b>SOWERS, HARRY 4322 COBBLE STONE COURT ORLANDO, FL 32810</b>				Name <b>Henry J. Jarvis</b>	
				Street Address (P.O. Box Number is Not Acceptable) <b>4228 Cobble Stone Court</b>	
				City <b>Orlando</b>	
				Zip Code <b>FL 32810</b>	
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 <i>Henry J. Jarvis</i>				DATE <b>4-26-2007</b>	
(NOTE: Registered Agent signature required when reinstating)					
<b>Filing Fee is \$61.25 Due by May 1, 2007</b>		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00</b> May Be Added to Fees	
<b>Make check payable to Florida Department of State</b>					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SOWERS, HARRY 4322 COBBLES STONE COURT ORLANDO, FL 32810	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD DOCTON, CATHERINE H. 4339 COBBLESTONE COURT ORLANDO, FL	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>Hartsfield, Catherine A.</b> <b>see attached document</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD GOTHANN, KEN 4117 COBBLE STONE COURT ORLANDO, FL 32810	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition <b>PD</b> <b>Henry J. Jarvis</b> <b>4228 Cobble Stone Court</b> <b>Orlando, FL 32810</b>	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition	
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>Cather A. Hartsfield</i>			DATE: <b>4/26/07</b>		DAYTIME PHONE #: <b>407 291-9670</b>
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR			DATE		DAYTIME PHONE #



FILED IN OFFICE  
DOMESTIC CIVIL

ATTACHMENT 60045681  
~~# 1706275~~

2006 OCT 24 AM 9:03

IN THE CIRCUIT COURT OF THE  
NINTH JUDICIAL CIRCUIT, IN AND  
FOR ORANGE COUNTY, FLORIDA

FILED IN OFFICE  
CLERK OF THE COURT

Case No.: DR 06-15433  
Division: 41

IN RE: THE NAME CHANGE OF

CATHERINE ANN HARTSFIELD DOCTON,  
Petitioner.

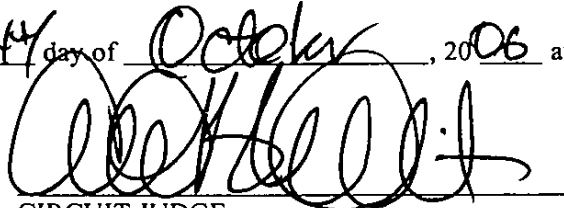
**FINAL JUDGMENT OF CHANGE OF NAME (ADULT)**

This cause came before the Court on {date} OCTOBER 24, 2006, for a hearing on  
Petition for Change of Name (Adult) under section 68.07, Florida Statutes, and it appearing to  
the Court that:


1. Petitioner is a bona fide resident of Orange County, Florida;
2. Petitioner's request is not for any ulterior or illegal purpose; and
3. Granting this petition will not in any manner invade the property rights of others, whether partnership, patent, good will, privacy, trademark, or otherwise; it is

**ORDERED** that Petitioner's present name, CATHERINE ANN HARTSFIELD  
DOCTON, is changed to **CATHERINE ANN HARTSFIELD**, and whose date of birth is  
02/06/1957, by which Petitioner shall hereafter be known.

**DONE AND ORDERED** in Chambers this 24 day of October, 2006 at  
Orlando, Orange County, Florida.

  
CIRCUIT JUDGE

**COPIES TO:**  
Petitioner (or his or her attorney)

STATE OF FLORIDA, COUNTY OF ORANGE  
I HEREBY certify that the foregoing is  
a true and correct copy of the original  
LYDIA GARDNER, Clerk of the Circuit Court  
and  
By:   
Deputy Clerk  
Dated: \_\_\_\_\_