2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 08:00 AM
Secretary of State

DOCUMENT # N08243

1. Entity Name
COURTSIDE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
475 38TH SQUARE SW VERO BEACH, FL 32968 US	475 38TH SQ S.W. VERO BEACH, FL 32968 US

01032006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-2525312

☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☒ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

MORGAN, LYNNE
475 38TH SQ S.W.
VERO BEACH, FL 32968

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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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

000000488152
04/11/06-80104-028 8.75

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000488152
04/11/06-80104-029 61.25

10. OFFICERS AND DIRECTORS

TITLE	PD
NAME	MARTINELLI, JOHN
STREET ADDRESS	445 38TH SQSW
CITY-ST-ZIP	VERO BEACH, FL 32968
TITLE	TD
NAME	VOLLMANN, PETER
STREET ADDRESS	370 38TH SQ S.W.
CITY-ST-ZIP	VERO BEACH, FL 32968
TITLE	SD
NAME	BRESLIN, DIANE
STREET ADDRESS	395 38TH SQ SW
CITY-ST-ZIP	VERO BEACH, FL 32968
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

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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: Peter H. Vollmann 3/13/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

John Martinelli Peter H. Vollmann