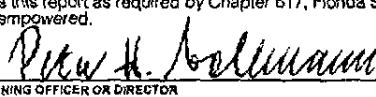


**2006 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

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

DOCUMENT # N08243		
1. Entity Name COURTSIDE PROPERTY OWNERS ASSOCIATION, INC.		
Principal Place of Business 475 38TH SQUARE SW VERO BEACH, FL 32968 US		Mailing Address 475 38TH SQ S.W. VERO BEACH, FL 32968 US
DO NOT WRITE IN THIS SPACE		
		
01032006 No Chg-NP CR2E037 (11/05)		
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		DO NOT WRITE IN THIS SPACE
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)		
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees
10. OFFICERS AND DIRECTORS		04/11/06-80104-028 8.75
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MARTINELLI, JOHN 445 38TH SQSW VERO BEACH, FL 32968	04/11/06-80104-029 61.25
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD VOLLMANN, PETER 370 38TH SQ S.W. VERO BEACH, FL 32968	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD BRESLIN, DIANE 395 38TH SQ SW 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		
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:  		3/13/06
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date Daytime Phone #
John Martinelli Peter H. Vollmann		