


2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 15, 2004 8:00 am
Secretary of State

03-04-2004 90016 030 ****61.25

DOCUMENT # N08542			
1. Entity Name COACHWOOD COLONY HOME OWNERS ASSOCIATION, INC.			
Principal Place of Business 748 CALLIANOREA CT LEESBURG FL 34748 US		Mailing Address 748 CALLIANOREA CT LEESBURG FL 34748 US	
2. Principal Place of Business 2606 COLEMAN PLACE Suite, Apt. #, etc.		3. Mailing Address 2606 COLEMAN PLACE Suite, Apt. #, etc.	
City & State LEESBURG FL		City & State LEESBURG FL	
Zip 34748	Country USA	Zip 34748	Country USA
6. Name and Address of Current Registered Agent OWENS, JOE B. 2611 COLEMAN PLACE LEESBURG FL 34748		4. FEI Number 59-2998476	
7. Name and Address of New Registered Agent Name ROBERT L. SUTPHIN Street Address (P.O. Box Number is Not Acceptable) 2606 COLEMAN PLACE City LEESBURG FL Zip Code 34748		Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
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>Robert L. Suthin</i>		DATE: 2-26-04	
FILE NOW: FEE IS \$61.25 Due By May 1, 2004		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	
Make Check Payable to Florida Department of State			
10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GLENNON, JOHN 724 MOCKINGBIRD LANE LEESBURG FL 34748 <i>Board Member</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	JOE OWENS 2611 COLEMAN PLACE LEESBURG FL 34748 <i>Board Member</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RICHARDS, GEORGE 731 CORKWOOD EAST LEESBURG FL 34748 <i>Board member</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	DOROTHY FLOWERS 501 ALEXANDER Rd. LEESBURG FL 34748 <i>Secretary</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUDSON, BILL 520 OLD COLONY RD LEESBURG FL 34748	TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROBERT SUTPHIN 2606 COLEMAN PLACE LEESBURG FL 34748 <i>Treasurer</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MURDOCK, PAT 510 REMANN LEESBURG FL 34748	TITLE NAME STREET ADDRESS CITY-ST-ZIP	RICHARD ANDERSON 729 COACH WOOD EAST LEESBURG FL 34748 <i>Board member</i>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	L LAYTON, MICHAEL 748 CALLIANDRIA COURT LEESBURG FL 34748 <i>President</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	C CLEMENTS, KENNETH 740 CALLIANDRIA CT LEESBURG FL 34748 <i>vice President</i>	TITLE NAME STREET ADDRESS CITY-ST-ZIP	
12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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>Michael Layton</i>		SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR MICHAEL LAYTON PRESIDENT	
		Date: 2/26/04 Daytime Phone # 352-365-0512	

66405968



MOORE CR2E037 (11/03)