

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N08773

FILED
Apr 21, 2005
Secretary of State

Entity Name: COUNTRY CLUB ESTATES COOPERATIVE, INC.

Current Principal Place of Business:

C/O WILLIAM R. KORP
240 SOUTH PINEAPPLE AVENUE
SARASOTA, FL 34226

New Principal Place of Business:

Current Mailing Address:

C/O WILLIAM R. KORP
700 WATERWAY
VENICE, FL 34285

New Mailing Address:

FEI Number: 59-2653265

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

STEVENS, RONALD
702 CAREFREE
VENICE, FL 34285 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: VD () Delete
Name: SIMMONS, KENNETH
Address: 860 S. GREEN CIRCLE
City-St-Zip: VENICE, FL 34285

Title: PD () Delete
Name: STEVENS, RONALD
Address: 702 CAREFREE
City-St-Zip: VENICE, FL 34285

Title: ATD () Delete
Name: RUPPRECHT, FRANK
Address: 744 N WATERWAY
City-St-Zip: VENICE, FL 34285

Title: SD () Delete
Name: STEINER, RUBY
Address: 707 S WATERWAY
City-St-Zip: VENICE, FL 34285

Title: TD () Delete
Name: MYERS, JACKIE
Address: 727 CAREFREE
City-St-Zip: VENICE, FL 34285

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: KENNETH SIMMONS

VD

04/21/2005

Electronic Signature of Signing Officer or Director

Date