

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 15, 2006 8:00 am
Secretary of State

02-15-2006 90053 006 ****61.25

DOCUMENT # N09846	
1. Entity Name COUNTRY CLUB VILLAGE PROPERTY OWNERS ASSOCIATION, INC.	

Principal Place of Business 527 GREENWAY DRIVE LAKE WALES FL 33898 US	Mailing Address 527 GREENWAY DRIVE LAKE WALES FL 33898 US
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2. Principal Place of Business 2645 FAIRWAY COURT Suite, Apt. #, etc.	3. Mailing Address Suite, Apt. #, etc.
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1st MOORE CR2E037 (10/05)

City & State LAKE WALES, FL, US	City & State
Zip 33898	Country Polk

4. FEI Number 59-2633192	Applied For Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent WILLIAMS, ROBERT L., JR., ESQ. 225 E. PARK AVENUE LAKE WALES FL 33853	
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7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City FL Zip Code	
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

FILE NOW - FEE IS \$61.25 Due By May 1, 2006	9. Election Campaign Financing Trust Fund Contribution. ☐ \$5.00 May Be Added to Fees	Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY - ST - ZIP	PD WILKINSON, EDWARD 567 CLUB HOUSE DRIVE LAKE WALES FL ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☒ Addition 33898
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VP NELSON, HARRY 518 CLUBHOUSE DR LAKE WALES FL 33898 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD JOHNS, LONNIE E 527 GREENWAY DRIVE LAKE WALES FL 33898 ☒ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☒ Change ☐ Addition 33898
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD ARMINGTON, BOB 2640 FAIRWAY CT LAKE WALES FL 33898 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	SD AVERY, JOHN 569 CLUBHOUSE DR. LAKE WALES FL 33898 ☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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: *Lonnie E. Johns* 1-26-06 963-676-2175

ATTACHMENT

50000245-
#N09846

FEBRUARY 3, 2006

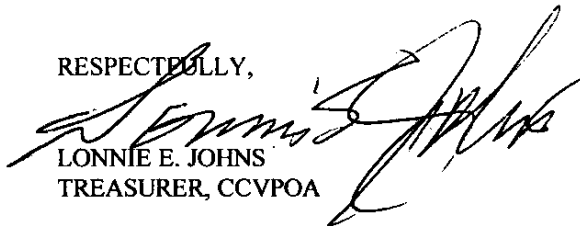
TO WHOM CONCERNED;

I AM WRITING TO YOU IN ORDER TO TRY AND GET
A CERTIFICATE OF STATUS.

IN 2004, APRIL 15, I SENT TO YOUR DEPARTMENT A
CHECK FOR \$69.00. THIS WAS TO PAY THE FILING FEE FOR THE
CORPORATION AND FOR THIS CERTIFICATE.

AS OF THIS DATE, I HAVE NOT RECEIVED THIS CERT-
IFICATE. I WOULD APPRECIATE VERY MUCH IF YOUR OFFICE WOULD
TAKE CARE OF THIS FOR ME.

RESPECTFULLY,


LONNIE E. JOHNS
TREASURER, CCVPOA