

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 20, 2006 8:00 am
Secretary of State

04-20-2006 90208 011 ****61.25

DOCUMENT # N11130	
1. Entity Name COUNTRY WALK OF PORT ORANGE HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business P O BOX 291654 PORT ORANGE, FL 32129-1654	Mailing Address P O BOX 291654 PORT ORANGE, FL 32129-1654
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2. Principal Place of Business 1166 PELICAN BAY DR.	3. Mailing Address 1166 PELICAN BAY DR.
Suite, Apt. #, etc.	Suite, Apt. #, etc.

City & State DAYTONA BEACH, FL.	City & State DAYTONA BEACH, FL.
Zip 32119	Zip 32119
Country	Country



04082006 Chg-NP CR2E037 (11/05)

4. FEI Number 59-2619334	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 YAKLIN, PAUL 3487 COUNTRY WALK DRIVE PORT ORANGE, FL 32129	
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7. Name and Address of New Registered Agent Name MICHELE BARKIN Street Address (P.O. Box Number is Not Acceptable) 1166 PELICAN BAY DR. City DAYTONA BEACH FL Zip Code 32119	
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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 Michele Barkin MICHELE BARKIN 4-8-06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing 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	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CARTY, KATHRYN A 3453 FOX HUNT COURT PORT ORANGE, FL 32129 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD COX, TANYA 3454 FOX HUNT COURT PORT ORANGE, FL 32129 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D CARTER, DONALD 3454 MARTINGALE CT DAYTONA BEACH, FL 32119 ☒ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD YAKLIN, PAUL 6487 COUNTRY WALK DR. PORT ORANGE, FL 32129 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D OEHME, BARBARA 3463 COUNTRY WALK DRIVE PORT ORANGE, FL 32129 ☐ Delete
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KALLE, JAMES 3459 COUNTRY WALK DR. PORT ORANGE, FL 32129 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PHYLLIS MIRACLE 3460 FOX HUNT COURT SD PORT ORANGE, FL 32129 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	WANDA GILCHRIST 3466 COUNTRY WALK DR. VP PORT ORANGE, FL 32129 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DON BURNETTE D 3443 COUNTRY WALK DR. PORT ORANGE, FL 32129 ☐ Change ☒ Addition

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 Paul Yaklin, Pres. 4-18-06