## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N15559

## **FILED** Mar 18, 2005 8:00 am Secretary of State 03-18-2005 90052 038 \*\*\*\*61.25

1. Entity Nam COUNTR	Y OAKS HOME OWNERS, I								
Principal Place of Business 1105 O'DONIERL LOOP S LAKELAND, FL 33809 US		Mailing Address P O BOX 90682 LAKELAND, FL 33804 US			· :	مسا	,	·	
Principal Place of Business     3. Mailing Address									
//2.9 O'DON/EL LOOP 5. Suite, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			03032005 Chg-NP CR2E037 (10/03)			
City & State  1 AKELAND FL		City & State	City & State		E0 2602600			lied For Applicable	
Zip Country 33809 U.S. A		Zip	Zip Country		5. Certificate of Status Desired S8.75 Additional Fee Required				
6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name Name									
7120 CEN	IAAS, KAREN TERHILL DRIVE	TORIEEW/ O. Box Number is Not Accept	table)		<del> 3</del> .				
LAKELANI 	D, FL 33809	DONIEL LOOP							
			City X	AKE	LAND	FL	Zip Code	FD9	
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 MOVALUS AUUS SIGNATURE (NOTE: Registered Agent signature required when reinstating)  DATE									
Filing Fee is \$61.25  9. Election Campaign Financing \$5.00 May Be Make check payable to									
Due by May 1, 2005 Trust Fund Contribution.   10. OFFICERS AND DIRECTORS 11.				A	Idded to Fees  DITIONS/CHANGES TO OFF	Florida Departme			
TITLE	D	Delete		N D		n	Change	Addition	
NAME STREET ADDRESS	LEWIS, FRANCIS  1112 O'NIEL LOOP N	, h	NAME STREET ADDRESS	1/2	PRJORIE LEWIS	<b>S</b> .			
CITY-ST-ZIP	LAKELAND, FL 33809		CITY-ST-ZIP	<u>_LA</u>	KELAND, FL 3	13F09			
TITLE NAME	T JONES, RICHARD H	▼ Delete	TITLE NAME	VP, D Fl	MANK CAMPBEL	. <b>L</b>	Change	Addition	
STREET ADDRESS CITY-ST-ZIP	7220 CENTERHILL DR LAKELAND, FL 33809		STREET ADDRESS CITY-ST-ZIP	10	DÍO O'DONIÉL DA AKELAND, FL 3	₹			
TITLE	D	Delete			ANNETTE WILL		Change	Addition	
NAME STREET ADDRESS	CHRISTINO, JOY 7204 CENTERHILL DR		NAME STREET ADDRESS	(	6725 O'DONIEN	LLOOP W.			
CITY-ST-ZIP	VPD LAKELAND, FL 33809	De Delete	CITY-ST-ZIP	<del></del>	LAKELAND, FL		Change	Addition	
NAME	SMITH, CHARLOTTE -	TE DEIGE	NAME - ·	-GE	RALDINE PATA	.EY	Change	Addition	
STREET ADDRESS CITY-ST-ZIP	1018 O'DONIEL DRIVE LAKELAND, FL 33809		STREET ADDRESS CITY-ST-ZIP	LA	19 CENTERHILL PKELAND, FL 33	DK. 3809			
TITLE	PD KANDEDWAAG KAREN	Delete .	TITLE	<u> </u>	ASE MATLEY		Change	Addition	
NAME STREET ADDRESS	VANDERMAAS, KAREN 7120 CENTERHILL		NAME STREET ADDRESS	7//	9 CENTERHILL	DP.			
CITY-ST-ZIP	LAKELAND, FL 33809	**************************************	CITY-ST-ZIP		KELANO, FL 3	13809		-	
TITLE NAME	SD LEWIS, CAROLYN-HOPE	5 Delete	TITLE NAME	D DAI	DAGNAR DIV		] Change	Addition	
STREET ADDRESS	1112 O'DONIEL LOOK NORTH		STREET ADDRESS	710	2 O'DONIEL 20				
CITY-ST-ZIP	LAKELAND, FL 33809	this filing does not a self-id	CITY-ST-ZIP			<i>33809</i>	1b = 4 tb . + 4		
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 the control of the control or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that or produce appears in the control of the receiver or trustee empowered.									