

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 29, 2006 8:00 am
Secretary of State

03-29-2006 90114 034 ****61.25

DOCUMENT # N15559 1. Entity Name COUNTRY OAKS HOME OWNERS, INCORPORATED					
Principal Place of Business 1129 O'DONIEL LOOP S. LAKELAND, FL 33809 US			Mailing Address P O BOX 90682 LAKELAND, FL 33804 US		
2. Principal Place of Business 1010 O'DONIEL DR Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.			
City & State LAKELAND, FL		City & State Suite, Apt. #, etc.		03042006 Chg-NP CR2E037 (11/05)	
Zip 33809		Country US		4. FEI Number 59-2692688	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent LEWIS, MARJORIE 7120 CENTERHILL DRIVE LAKELAND, FL 33809			7. Name and Address of New Registered Agent Name FRANK CAMPBELL Street Address (P.O. Box Number is Not Acceptable) 1010 O'DONIEL DR City LAKELAND FL Zip Code 33809		
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>Frank R. Campbell</i> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)</small>				DATE 3/25/06	
Filing Fee is \$61.25 Due by May 1, 2006		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					
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D LEWIS, MARJORIE 1129 O'DONIEL LOOP S. LAKELAND, FL 33809	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D MARINUS VANDERMAAS 7120 CENTERHILL DR. LAKELAND, FL 33809	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP/D CAMPBELL, FRANK 1010 O'DONIEL DR LAKELAND, FL 33809	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D 	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D WILSON, ANNETTER 6725 O'DONIEL LOOP W. LAKELAND, FL 33809	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D NICOLE LYNN 1121 O'DONIEL LOOP S. LAKELAND, FL 33809	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T RATLEY, GERALDINE 7119 CENTERHILL DR LAKELAND, FL 33809	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D TED CHRISTINO 7204 CENTERHILL DR. LAKELAND, FL 33809	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D RATLEY, MEASE 7119 CENTERHILL DR LAKELAND, FL 33809	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MARCIA PEACOCK 1230 O'DONIEL LOOP S. LAKELAND, FL 33809	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D ARNOLD, DAVID 7102 O'DONIEL LOOP W. LAKELAND, FL 33809	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> 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: <i>Geraldine Ratley</i> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>				DATE 3/25/06 8635592529 <small>Date Daytime Phone #</small>	

GERALDINE RATLEY