

# 2009 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N15559

FILED  
Sep 08, 2009  
Secretary of State

Entity Name: COUNTRY OAKS HOME OWNERS, INCORPORATED

**Current Principal Place of Business:**

5337 N. SOCRUM LOOP RD  
109  
LAKELAND, FL 33809 US

**New Principal Place of Business:**

**Current Mailing Address:**

5337 N. SOCRUM LOOP RD  
109  
LAKELAND, FL 33809 US

**New Mailing Address:**

FEI Number: 59-2692688      FEI Number Applied For ( )      FEI Number Not Applicable ( )      Certificate of Status Desired ( )  
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

**Name and Address of Current Registered Agent:**

CAMPBELL, FRANK  
1010 O'DONIEL DR  
LAKELAND, FL 33809 US

**Name and Address of New Registered Agent:**

CHRISTINO, TED  
7104 CENTERHILL DR  
LAKELAND, FL 33809 US

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: TED CHRISTINO

09/08/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: VPD ( ) Delete  
Name: CHRISTINO, TED  
Address: 7104 CENTERHILL DR  
City-St-Zip: LAKELAND, FL 33809

Title: PD ( ) Delete  
Name: CAMPBELL, FRANK  
Address: 1010 O'DONIEL DR  
City-St-Zip: LAKELAND, FL 33809

Title: S/D (X) Delete  
Name: BARCHANOWICZ, CINDY  
Address: 1050 O'DONIEL DR  
City-St-Zip: LAKELAND, FL 33809

Title: T ( ) Delete  
Name: BOWERS, LOIS J  
Address: 1026 O'DONIEL DR  
City-St-Zip: LAKELAND, FL 33809

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: VPD (X) Change ( ) Addition  
Name: PEACOCK, CLYDE  
Address: 1250 O'DONIEL LOOP SOUTH  
City-St-Zip: LAKELAND, FL 33809

Title: S (X) Change ( ) Addition  
Name: FIELDS, KIM  
Address: 1226 O'DONIEL LOOP NORTH  
City-St-Zip: LAKELAND, FL 33809

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 exemption stated 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 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: LOIS J. BOWERS

T

09/08/2009

Electronic Signature of Signing Officer or Director

Date