


# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Apr 03, 2006 8:00 am**  
**Secretary of State**

04-03-2006 90388 015 \*\*\*\*61.25

<b>DOCUMENT # N16937</b> 1. Entity Name <b>COUNTRY ESTATES HOMEOWNERS ASSOCIATION, INCORPORATED</b>					
Principal Place of Business <b>MIKE PHELPS</b> <b>1124 ESSEN AVE. N.W.</b> <b>PALM BAY, FL 32907 US</b>			Mailing Address <b>C. E. H. A.</b> <b>PO BOX 110059</b> <b>PALM BAY, FL 32907 US</b>		
2. Principal Place of Business Suite, Apt. #, etc.			3. Mailing Address Suite, Apt. #, etc.		
City & State			City & State		
Zip		Country		4. FEI Number <b>NOT APPLICABLE</b>	
5. Certificate of Status Desired <input type="checkbox"/>		<b>\$8.75 Additional Fee Required</b>			
6. Name and Address of Current Registered Agent  <b>PHELPS, MIKE</b> <b>1124 ESSEN AVE. N.W.</b> <b>PALM BAY, FL 32907</b>			7. Name and Address of New Registered Agent Name Street Address (P.O. Box Number is Not Acceptable) City		
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, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)		
<b>Filing Fee is \$61.25 Due by May 1, 2006</b>			9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		<b>\$5.00 May Be Added to Fees</b>
<b>Make check payable to Florida Department of State</b>			DATE		
<b>10. OFFICERS AND DIRECTORS</b>			<b>11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10</b>		
TITLE NAME STREET ADDRESS CITY - ST - ZIP	T PHELPS, DEBBIE 1124 ESSEN AVE. N.W. PALM BAY, FL 32907	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Beatty, Robert 350 Standa Rd. Palm Bay, FL 32907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P CAMERON, BONNIE 204 BANKS ST PALM BAY, FL 32907	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	S Wiegher, Luzette 810 Lynbrook Palm Bay, FL 32907	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D DUDA, JOHN 1286 STACLT ROAD PALM BAY, FL 32907	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Duda, Sohn 1286 Stadt Rd. Palm Bay, FL 32907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	V WIGNER, DOUG 810 LUNBROOK NW PALM BAY, FL 32907	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	V Wiegher, Doug 810 Lynbrook Palm Bay, FL 32907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WOODS, MILDRED 601 RINGER ST PALM BAY, FL 32907	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D woods, Mildred 601 Thuringer St. Palm Bay, FL 32907	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D CRADDOCK, LEO 1570 MANOR NW PALM BAY, FL 32907	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY - ST - ZIP	D Wales, Fran 821 Hunau Ave Palm Bay, FL 32901	<input type="checkbox"/> Change <input checked="" 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.					
<b>SIGNATURE:</b> <i>Debbie Phelps</i> <b>Debbie Phelps</b> <b>3/30/06</b>					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					