


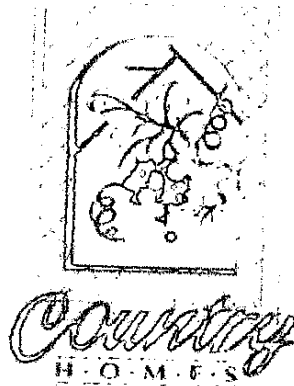
2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 21, 2006 8:00 am
Secretary of State

04-21-2006 90106 032 ****61.25

DOCUMENT # N17284					
1. Entity Name COUNTRY HOMES HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business 5760 SW 57TH TERRACE DAVIE, FL 33314 US			Mailing Address 5760 SW 57TH TERRACE DAVIE, FL 33314 US		
2. Principal Place of Business <i>4761 S.W. 57th Ave</i>		3. Mailing Address <i>4761 S.W. 57th Ave</i>			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State <i>DAVIE, Florida</i>		City & State <i>DAVIE, Florida</i>		4. FEI Number 65-0150494	
Applied For Not Applicable		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required			
Zip <i>33314</i>	Country <i>U.S.</i>	Zip <i>33314</i>	Country <i>U.S.</i>	6. Name and Address of Current Registered Agent	
EARNEST, MARY 6800-B GRIFFIN RD. DAVIE, FL 33314			7. Name and Address of New Registered Agent		
Name			Street Address (P.O. Box Number is Not Acceptable)		
City			FL Zip Code		
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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD TROTTA, STEVE 5760 SW 57TH ST DAVIE, FL 33314	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P.D. MARC FREIDER 4760 S.W. 57th Avenue DAVIE FL. 33314	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD FERGUSON, BILLIE 4701 SW 57TH TER DAVIE, FL 33314	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD Michael Ferrante 4721 S.W. 57th tera DAVIE FL. 33314	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SDTD SMITH, JUDITH 5760 SW 57TH TERRACE DAVIE, FL 33314	<input checked="" type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD OIGA BURNS 4770 S.W. 57th ter DAVIE FL. 33314	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP		<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP		<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>OIGA Burns</i>			Date: <i>4-17-06</i>		Daytime Phone #: <i>305-318-4540</i>
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>			<small>Date</small>		<small>Daytime Phone #</small>

ATTACHMENT 40056593
N17280



Country Homes Homeowner's Association Annual Budget
January 2006-December 2006

Dues Income	2005 Actual	2006 Projected
Total Income:	\$4,620.00	\$4,625.00

Expenses:

Maintenance of Common Areas (Lake, Lawn, Fence, Trees)	\$2,787.00	\$2,800.00
Postage and Office Supplies	\$ 32.32	\$ 100.00
Insurance	\$1,556.44	\$1,650.00
Taxes and Fees (County and State)	\$ 161.98	\$ 175.00
Legal Fees, Accounting Fees	\$ 0.00	\$ 150.00
Bank Fees	\$ 31.00	\$ 36.00

Total Expenses	\$4,568.74	\$4,911.00
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Adjusted Gross Income	\$51.26	Projected Gross Income - \$286.00
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2005 Carryover Balance (-/+) 2006 projected A.G.I.= period ending
2006 Projected Reserve Balance: \$5,337.98 - \$286.00 = \$5,051.98

Period ending 2006 Projected Reserve: \$ 5,051.98

Beers 4/17/06