

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N19481

FILED
Mar 28, 2006
Secretary of State

Entity Name: COVERED BRIDGE AT CURRY FORD WOODS ASSOCIATION, INC.

Current Principal Place of Business:

2180 W. ST RD. 434
SUITE 5000
LONGWOOD, FL 327795044

New Principal Place of Business:

Current Mailing Address:

2180 W. ST RD. 434
SUITE 5000
LONGWOOD, FL 327795044

New Mailing Address:

FEI Number: 59-2847791

FEI Number Applied For ()

FEI Number Not Applicable ()

Certificate of Status Desired ()

Name and Address of Current Registered Agent:

VANDERVLIT, AMANDA M
882 JACKSON AVE.
WINTER PARK, FL 32789 US

Name and Address of New Registered Agent:

HART, JAMES W JR
SENTRY MANAGEMENT INC
2180 W SR 434 SUITE 5000
LONGWOOD, FL 32779 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: JAMES W HART JR

03/28/2006

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: SD () Delete
Name: WHITE, BRENDA
Address: 7824 SAGEBRUSH PL
City-St-Zip: ORLANDO, FL 32822

Title: PD () Delete
Name: GATELL, LISA
Address: 7808 CURRY VILLAGE LN.
City-St-Zip: ORLANDO, FL 32822

Title: TD () Delete
Name: ALLEN, GREG
Address: 7957 SAGEBRUSH PLACE
City-St-Zip: ORLANDO, FL 32822

Title: VPD (X) Delete
Name: FLEMMING, JOHN
Address: 7974 MERRIMAC COVE
City-St-Zip: ORLANDO, FL 32822

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: VPD (X) Change () Addition
Name: WHITE, BRENDA
Address: 7824 SAGEBRUSH PL
City-St-Zip: ORLANDO, FL 32822

Title: PD (X) Change () Addition
Name: GATELL, LISA
Address: 2808 CURRY VILLAGE LN
City-St-Zip: ORLANDO, FL 32822

Title: STD (X) Change () Addition
Name: ALLEN, GREGORY
Address: 7957 SAGEBRUSH PLACE
City-St-Zip: ORLANDO, FL 32822

Title: () Change () Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the 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: LISA GATELL

PD

03/28/2006

Electronic Signature of Signing Officer or Director

Date