## 2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

## Jan 26, 2006 8:00 am Secretary of State DOCUMENT # N19858 1. Entity Name 01-26-2006 90027 048 \*\*\*\*61.25 THE KNOLL-CENTURY HILL HOMEOWNER'S ASSOCIATION, INC. Principal Place of Business Mailing Address 1401 W. MONTS DE OCA RD. 1401 W. MONTS DE OCA RD. **AVON PARK FL 33825 AVON PARK FL 33825** 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (10/05) 1st MOORE City & State City & State Applied For 4. FE! Number 59-2484379 Not Applicable Zip Country Zio Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name MCCOLLUM, JAMES F. Street Address (P.O. Box Number is Not Acceptable) 129 S. COMMERCE AVENUE SEBRING FL 33870 City 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution. $\Box$ Dué By May 1, 2006 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 VD TITLE TITLE ☐ Delete Change ☐ Addition METTERNICK, CAROLYN NAME NAME 64 CENTURY BLVD STREET ADDRESS STREET ADDRESS AVON PARK FL 33825 CITY-ST-ZIP CITY-ST-ZIP D TITLE Delete TITLE Change Addition Lewis, Richard 59 Century Blub. NAME WOEHLERT, LARRY NAME 27 CENTURY BLVD STREET ADDRESS STREET ADDRESS AVON PARK, FL. 33825 AVON PARK FL 33825 CITY-ST-7IP CITY-ST-ZIP SD TITLE ☐ Delete TITLE Change ■ Addition NAME FETTE, ANN NAME STREET ADDRESS 105 SOUTH RALLY ROAD STREET ADDRESS CITY-ST-ZIP AVON PARK FL 33825 CITY-ST-ZIP TD TITLE ☐ Delete ☐ Change ■ Addition NAME GRAVITT, MARIE L. NAME STREET ADDRESS 29 CENTURY BLVD STREET ADDRESS CITY-ST-ZIP AVON PARK FL CITY-ST-ZIP TITLE ☐ Defete TITLE ☐ Change ■ Addition FISHER, SHARON NAME NAME 68 CENTURY BLVD STREET ADDRESS STREET ADDRESS **AVON PARK FL 33825** CITY-ST-ZIP CITY-ST-ZIP Delete ☐ Addition ittleson, Bob Century Blup, LESTER, MILDRED NAME NAME 90 SOUTH RALLY ROAD STREET ADDRESS STREET ADDRESS **AVON PARK FL 33825** CITY-ST-ZIP CITY-ST-ZIP UON PARK FL

**FILED** 

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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. 0.1 (> hault 1.10 A/ 1012) 1/52 0-1/0