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

## May 08, 2006 8:00 am Secretary of State DOCUMENT # N22456 1. Entity Name 05-08-2006 90307 047 \*\*\*\*61.25 THE COURTYARDS OWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 4400 NW36TH AVE GAINESVILLE FL 32606 4400 NW36TH AVE GAINESVILLE FL 32606 2. Principal Place of Business 3. Mailing Address Suite. Apt. #. etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/05) City & State City & State Applied For 4. FEI Number 59-2860989 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent TRIPPE, PAT Street Address (P.O. Box Number is Not Acceptable) 4400 NW 36TH AVE GAINESVILLE FL 32606 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 title if applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Due By May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE Delete TITLE ☐ Change ■ Addition Don Koretz BALDWIN, BARBARA NAME NAME 38 NN 25 Circle 3872 NW 25 CIRCLE STREET ADDRESS STREET ADDRESS Gamesville Fl. 32606 GAINESVILLE FL 32606 CITY-ST-ZIP CITY-ST-ZIP Sec ☐ Delete TITLE ☐ Change ☐ Addition TITLE William Gobus MORTON, BOB NAME NAME 3880 NW 25 Curcle STREET ADDRESS 3941 NW 25 CIRCLE STREET ADDRESS Gamesville Fl. 32606 GAINESVILLE FL 32606 CITY-ST-ZIP CITY-ST-ZIP TITLE DT Delete TITLE Change \_ Addition Lois Myers FERRIS, SALLY NAME NAME 3946 NW 25 Circle 3866 NW 25 CIR STREET ADDRESS STREET ADDRESS Jamesville, Fl. 32606 GAINESVILLE FL 32606 CITY-ST-ZIP CITY-ST-ZIP Addition TITLE Delete TITLE Ernestine Denmark Change FREDERICK, JOHN NAME NAME 3956 NW 25 arcle STREET ADDRESS 3908 NW 25 CIR STREET ADDRESS Gamesville Fl. 32606 CITY-ST-ZIP GAINESVILLE FL 32606 CITY-ST-ZIP TITLE Delete TITLE ☐ Change ☐ Addition DILLEY, ELIZABETH 3882 NW 25 CIR STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32606 CITY-SI-ZIP CITY-ST-ZIP Delete ☐ Change Addition TITLE TITLE WHITE, PHILIP NAME NAME 3923 NW 25 CIR STREET ADDRESS STREET ADDRESS GAINESVILLE FL 32606 CITY-ST-7IP CITY-ST-ZIP

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12. Thereby 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 apport 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:

DONALDKORETZ 4/21/06 377-3728