,, 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DO NOT WRITE IN THIS SPACE

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DOCUMENT # N22573

Entity Name

CLAYLAND OAKS OWNERS ASSOCIATION, INC.



Mailing Address

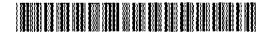
Principal Place of Business C/O AGUSTIN BRUNO 18354 114 PLACE

18354 114 PLACE LIVE OAK, FL 32060 US

C/O AGUSTIN BRUNO 18354 114 PLACE LIVE OAK, FL 32060

US

FILED Jan 31, 2006 08:00 AM Secretary of State



01192006 No Chg-NP

CR2E037 (11/05)

4. FEI Number 59-2896819

Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent

BRUNO, AGUSTIN 18354 114 PLACVE LIVE OAK, FL 32060

SIGNATURE: Lege

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202 5184 1 2 2232			IN THIS SPACE			
	named entity submits this statement for tions of registered agent.	he purpose of changing its register	ed office or r	egistered agent, or bo	oth, in the State of Florida I am familiar with, and accept	
SIGNATURE.	Signature typed or printed name of registered agent and	d wire if applicable. (NOTE, Registere	d Agent signatur	e required when reinstating)	CATE	
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Final Trust Fund Contribution.		\$5.00 May Be Added to Fees		
10.	OFFICERS AND D	RECTORS				
TITLE NAME STREET ADDRESS CITY-SI-IP	PD BRADFORD, JEFF 18393 116 PLACE LIVE OAK, FL 32060	-		U80888418150 82/09/86-80022-028 61. 25		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD DOBBELS, KIPPY 5470 TORONTO ROAD WEST PALM BEACH, FL 33415	- : : : : : : : : : : : : : : : : : : :	0 <u>0</u> ,00,00 00000 000 0110			
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD BRUNO, AGUSTIN 18354 114 PLACE LIVE OAK, FL 32060			DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP			IN THIS SPACE			
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
TITLE NAME STREET ADDRESS CITY-ST-ZIP						
12. (hereby of indicated of the corchanged,	pertify that the information supplied with it on this report or supplemental report is tr poration or the receiver or trustee empow or on an attachment with an address, wit	nis filling does not qualify for the exi ue and accurate and that my signa ared to execute this report as requi h all other like empowered.	emptions co- ture shall har red by Chap	ntained in Chapter 11 ve the same legal effe- ter 617, Florida Statuti	 Florida Statutes. I luther certify that the information of as if made under oath, that I am an officer or director es; and that my name appears in Block 10 or Block 11 if 	