2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N24918

FILED Apr 06, 2005 Secretary of State

Entity Name: COUNTRY CREEK VII HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business: 2180 W SR 434, SUITE 5000 LONGWOOD, FL 32779 **Current Mailing Address: New Mailing Address:** 2180 WEST SR 434 SUITE 5000 LONGWOOD, FL 327795044 US FEI Number: 59-2879954 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: HART, JAMES W JR SENTRY MANAGEMENT, INC 2180 STATE RD 434 W, SUITE 5000 LONGWOOD, FL 327795044 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: Electronic Signature of Registered Agent Date **OFFICERS AND DIRECTORS:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete () Change () Addition BRANIFF, CHRIS Name: Name: 8974 N ROSE HILL DR Address: Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: () Delete Title: () Change () Addition MCDUFFIE, BILL Name: Name: Address: 1379 W ROSE HILL DR Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: SD Title: (X) Change () Addition () Delete MURFIN, ED HIGHLANDS, BOB Name: Name: 8929 CHERRY HILL DR Address: Address: 8856 CHERRY HILL DR City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: JACKSONVILLE, FL 32221 Title: TD () Delete Title: () Change () Addition Name: OAKLEY, BOBBY Name: Address: 1447 E ROSE HILL DR Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: () Delete Title: () Change () Addition ALLEN, LARRY Name: Name: 1383 MAYBERRY LN Address: Address: City-St-Zip: JACKSONVILLE, FL 32221 City-St-Zip: Title: () Delete Title: () Change () Addition FENNELL, MARY ANN Name: Name: Address: 1390 W ROSE HILL DR Address: JACKSONVILLE, FL 32221 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: CHRIS BRANIFF PD 04/06/2005