2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N40017

FILED Jan 06, 2007 Secretary of State

Entity Name: GREATER COUNTRY ESTATES HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:		New Principal Place	New Principal Place of Business:		
P.O. BOX MOUNT [(1753 DORA, FL 3275	57 US			
Current Mailing Address:			New Mailing Address	New Mailing Address:	
P.O. BOX MOUNT [(1753 DORA, FL 3275	57 US			
FEI Numbei	r: 59-3030460	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and Address of Current Registered Agent:			Name and Address o	Name and Address of New Registered Agent:	
7736 LAK	ON, WALTER A Æ ANDREA CIR DORA, FL 3275	RCLE			
	e named entity s te of Florida.	submits this statement for the	purpose of changing its registered	d office or registered agent, or both,	
SIGNATU	JRE:				
	Electron				
OFFICERS AND DIRECTORS:			gent	Date	
OFFICER	RS AND DIREC	iic Signature of Registered Actors:		Date ES TO OFFICERS AND DIRECTORS:	
Title: Name: Address:	VPD () ESTEY, DORA 7681 LAKE ANI	TORS: Delete MAE DREA CIRCLE			
Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	VPD () ESTEY, DORA 7681 LAKE AND MOUNT DORA, STD () TENNYSON, W. 7736 LAKE AND	TORS: Delete MAE DREA CIRCLE FL 32757 Delete ALTER A DREA CIRCLE	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTORS:	
Fitle: Name: Address: City-St-Zip: Fitle: Name: Address:	VPD () ESTEY, DORA I 7681 LAKE AND MOUNT DORA, STD () TENNYSON, W. 7736 LAKE AND MOUNT DORA, PD () KNIBBS, SONIA 7723 LAKE AND	TORS: Delete MAE DREA CIRCLE FL 32757 Delete ALTER A DREA CIRCLE FL 32757 Delete A DREA CIRCLE FL 32757	ADDITIONS/CHANGE Title: Name: Address: City-St-Zip: Title: Name: Address: City-St-Zip:	ES TO OFFICERS AND DIRECTORS:	

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: W. A. TENNYSON STD 01/06/2007