



2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 11, 2007 08:00 A
Secretary of State

DOCUMENT # N40793	
1. Entity Name CONTINENTAL PARK HOMEOWNERS ASSOCIATION, INC.	

Principal Place of Business 8472 SW 102 STREET MIAMI, FL 33156 US	Mailing Address 8472 SW 102 STREET MIAMI, FL 33156 US
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DO NOT WRITE IN THIS SPACE



04082007 No Chg-NP CR2E037 (4/06)

4. FEI Number 65-0231381	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	

6. Name and Address of Current Registered Agent

**CONNER, LINDSEY
8472 SW 102ND STREET
MIAMI, FL 33156**

**DO NOT WRITE
IN THIS SPACE**

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

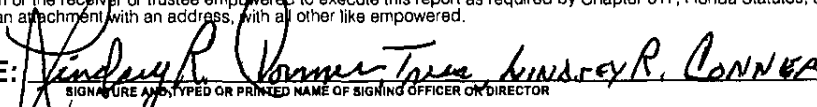
Filing Fee Is \$61.25 Due by May 1, 2007	9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$5.00 May Be Added to Fees	U000000701428 04/20/07-80057-013 61.25
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10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CSANALOSI, ROBERT A 8021 SE 97 STREET MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD WHITE, HOLLY 9300 S W 80 AVE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD KRENEK, RICHARD 8900 SW 79 AVENUE MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MCCULLOUGH, MICHAEL 9525 SW 77 PL MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD CONNER, LINDSEY 8472 SW 102 ST MIAMI, FL 33156
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S KOCH, HERMAN 7901 SW 97 ST MIAMI, FL 33156

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IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained 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 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:  **4-8-07 305-294-0222**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #