2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Mar 08, 2006 08:00 AM Secretary of State

				Secretary of State			
DOCUMENT # N41344 1. Entity Name DELTA FARMS PROPERTY OWNER'S ASSOCIATION, INC.				Secretary of State			
1 '	re of Business	Mailing Address		}			
3975 20TH	STREET	3975 20TH STREET SUITE !					
	1, FL 32960	VERO BEACH, FL 32960		} 13 98 117913	en Brest ræft hat støtt støt	e wewell with the well	CONTROL WINDS WENGELING NO LANG
_			03032006	No Chg-NP	CR2E03	37 (11/05)	
DO NOT WRITE IN THIS SPA			CE	4. FEI Numi 65-02:			Applied For Not Applicable
				5. Certificat	e of Status Desired		\$8.75 Additional
6. Name and Address of Current Registered Agent						<u>`</u>	
ROGERS, T.G. JR. 3975 20TH STREET SUITE J VERO BEACH, FL 32960			DO NOT WRITE IN THIS SPACE				
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 st				are required when reinstating) DATE			
	Filing Fee is \$61.25 Due by May 1, 2006	9. Election Campaign Finar Trust Fund Contribution.		.00 May Be led to Fees			
10. OFFICERS AND DIRECTORS			-		· · · · · · · · · · · · · · · · · · ·		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD JOHNSON, SHERWOOD J 2650 S KINGS HWY FT PIERCE, FL						
NAME STREET ADDRESS CITY-ST-ZIP	D BANACK, WILTON RUSSELL 1650 20TH STREET VERO BEACH, FL				UNOQON 03/18/06-8	159202 30021-0	021 61.25
TITLE	PO		ŧ				

DO NOT WRITE IN THIS SPACE

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report of 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:

NAME

TITLE

NAME

TITLE MAME

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

ROGERS, T.G. JR.

3975 20TH STREET

VERO BEACH, FL

ROGERS, JEAN M

VERO BEACH, FL

DRISCOLL, PAUL J

2906 GROVE DR

FT PIERCE, FL

3975 20TH ST

Wor us J. T. G. KOGERS, Ja.

6 MARCH 2006 (772) 778-3859