


2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
May 02, 2006 8:00 am
Secretary of State

05-02-2006 90165 004 ****61.25

DOCUMENT # N93000002139 1. Entity Name OLDE HICKORY VILLAS COMMONS ASSOCIATION, INC.					
Principal Place of Business 9411 CYPRESS LAKE DR. STE 2 FORT MYERS, FL 33919 US			Mailing Address 9411 CYPRESS LAKE DR. STE 2 FORT MYERS, FL 33919 US		
2. Principal Place of Business		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State			
Zip	Country	Zip	Country		
6. Name and Address of Current Registered Agent				7. Name and Address of New Registered Agent	
CRUZ, BRYAN C/O SCHOO MANAGEMENT, INC. 9411 CYPRESS LAKE DRIVE SUITE 2 FT MYERS, FL 33919				Name Street Address (P.O. Box Number is Not Acceptable) City	
				FL Zip Code	
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's signature required when reinstating) <small>Signature, typed or printed name of registered agent and title, if applicable. DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution: <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	STD	<input checked="" type="checkbox"/> Delete	TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	RENNEKE, MARY LOU		NAME	Jim Ross	
STREET ADDRESS	14200 HICKORY MARSH LANE #10		STREET ADDRESS	14150 Hickory Marsh Lane #104	
CITY-ST-ZIP	FORT MYERS, FL 33912		CITY-ST-ZIP	Fort Myers, FL 33912	
TITLE	PD	<input checked="" type="checkbox"/> Delete	TITLE	PD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ANSCHUETZ, MARTHA		NAME	Del Renneke	
STREET ADDRESS	14001 HICKORY MARSH LN, #66		STREET ADDRESS	14200 Hickory Marsh Lane #115	
CITY-ST-ZIP	FT. MYERS, FL		CITY-ST-ZIP	Fort Myers, FL 33912	
TITLE	VPD	<input type="checkbox"/> Delete	TITLE	VPD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	ELLIOT, BILL		NAME	Ron Elisha	
STREET ADDRESS	14151 HICKORY MARSH LANE, #35		STREET ADDRESS	14201 Hickory Marsh Lane #23	
CITY-ST-ZIP	FORT MYERS, FL 33912		CITY-ST-ZIP	Fort Myers, FL 33912	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HARRIS, DALE		NAME	Bill Elliot	
STREET ADDRESS	14150 HICKORY MARSH LANE, # 104		STREET ADDRESS	14151 Hickory Marsh Lane #35	
CITY-ST-ZIP	FORT MYERS, FL 33912		CITY-ST-ZIP	Fort Myers, FL 33912	
TITLE	D	<input checked="" type="checkbox"/> Delete	TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	SEBATION, BILL		NAME	Tom Parker	
STREET ADDRESS	14000 HICKORY MARSH LANE, #16		STREET ADDRESS	14150 Hickory Marsh Lane #101	
CITY-ST-ZIP	MIAMI, FL 33192		CITY-ST-ZIP	Fort Myers, FL 33912	
TITLE		<input type="checkbox"/> Delete	TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
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: _____ <i>[Signature]</i> 4/5/06 <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Day/1st Phone #</small>					