## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED May 03, 2007 8:00 am Secretary of State

05-03-2007 90063 029 \*\*\*\*61.25

ANNOAL KLIOKI	
DOCUMENT # N9300004353	

1. Entity Name ROSEWOOD COURT PROPERTY OWNERS' ASSOCIATION, INC.



Principal Place of Business

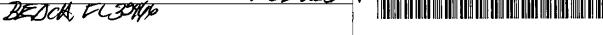
Mailing Address

- 979 BEACHLAND BLVD. -

- 979 BEACHLAND BEVO: VERO BEACH, FL 32963

1725 E POSTEWOOD CT

1723 E 1001EWOO CL 1723 E NOD VEDO BEDCH, VL394%



## DO NOT WRITE IN THIS SPACE

01292007 No Chg-NP

CR2E037 (4/06)

4. FEI Number NOT APPLICABLE Applied For Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

<ol><li>Name and</li></ol>	Address of	Current Reg	istered Agent

METCALF, ANDREW ESQ 5385 ROSEWOOD LN VERO BEACH, FL 32966

## DO NOT WRITE IN THIS SPACE

VERO BEA	ACH, FL 32966		IN THIS SPACE		
	named entity submits this statement for the prices of registered agent.	urpose of changing its registered office o	or registered agent, or bo	oth, in the State of Florida. I am familiar with, and accept	
SIGNATURE_	Signature, typed or printed name of registered agent and title if	I applicable. (NOTE: Registered Agent signa	(ure required when reinstating)	DATE	
	Filing Fee is \$61.25 Due by May 1, 2007	Election Campaign Financing     Trust Fund Contribution.	\$5.00 May Be Added to Fees		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	METGALF, JERRY ANDY / 1645 EAST ROSEWOOD CT 53 VERO BEACH, FL 32966 VIII	METCOLP 385 ROSEWOOD LN B, FC 329W	•		
NAME STREET ADDRESS CITY-ST-ZIP	DONADIO, ANTHONY J 1665 EAST ROSEWOOD COURT VERO BEACH, FL 32966				
NAME STREET ADDRESS CITY-ST-ZIP	DT KMETZ, MICHAEL L 1725 EAST ROSEWOOD COURT VERO BEACH, FL 32966		DO NOT WRITE		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SHIELDS, CHRISTIE 1760 EAST ROSEWOOD COURT VERO BEACH, FL 32966		IN	THIS SPACE	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KLAUS, DALE 5320 ROSEWOOD LN VERO BEACH, FL 32966				
TITLE NAME	DVP SUMMERS BILL				

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 frue 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 of the trustee empowered to execute his 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 enter like empowered.

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS | 5345 ROSEWOOD CT

VERO BEACH, FL 32966

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

\_\_\_\_

Daytime Phone #