2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 07, 2006
Secretary of State

DOCUMENT# N94000001291

Entity Name: DISCOVERY BAY HOMEOWNERS ASSOCIATION, INC.

Current Principal Place of Business:

P.O. BOX 1251
CAPE CANAVERAL, FL 32920 US

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 1251
CAPE CANAVERAL, FL 32920 US

New Mailing Address:

FEI Number: 59-3247077 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

JOHANSON, JOHN
310 ADAMS AVE
CAPE CANAVERAL, FL 32920 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: PD ( ) Delete
Name: JOHANSON, JOHN
Address: 310 ADAMS AVE
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: DS ( ) Delete
Name: LIEBICH, CAROLE
Address: 609 MANATEE BAY DR.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: DT ( ) Delete
Name: SCHORN, GEORGE
Address: 618 MANATEE BAY DR.
City-St-Zip: CAPE CANAVERAL, FL 32920

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: DS (X) Change ( ) Addition
Name: LIEBICH, CAROLE
Address: 604 MANATEE BAY DR.
City-St-Zip: CAPE CANAVERAL, FL 32920

Title: DT (X) Change ( ) Addition
Name: GILL, HAZEL
Address: 609 MANATEE BAY DR.
City-St-Zip: CAPE CANAVERAL, FL 32920

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: JOHN JOHANSON PD 04/07/2006

Electronic Signature of Signing Officer or Director — Date