2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000001978

FILED Apr 23, 2004 Secretary of State

Entity Name: CUMBERLAND FOREST OWNERS ASSOCIATION, INC.

Current Principal Place of Business:				New Principal Place of Business:		
	N JOSE BOLVD VILLE, FL 32257	US		4003 HARTLEY ROAD JACKSONVILLE, FL 322	57 US	
Current Mailing Address:				New Mailing Address:		
	N JOSE BOLVD VILLE, FL 32257	US		4003 HARTLEY ROAD JACKSONVILLE, FL 322	57 US	
FEI Number:	59-3247695 FE	Number Applied For()	FEI Nun	mber Not Applicable()	Certificate of Status Desired ()	
Name and	Address of Curre	nt Registered Agent:		Name and Address of N	ew Registered Agent:	
CANTRELL, BEVAN K 9889-1 SAN JOSE BLVD JACKSONVILLE, FL 32257				CANTRELL, BRYAN K 4003 HARTLEY ROAD JACKSONVILLE, FL 32257		
The above in the State	named entity subm e of Florida.	its this statement for the pu	urpose o	of changing its registered of	ffice or registered agent, or both,	
SIGNATURE: BRYAN K.CANTRELL					04/23/2004	
	Electronic Sig	gnature of Registered Age	nt		Date	
OFFICERS AND DIRECTORS:				ADDITIONS/CHANGES	TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	TD () Delet ALEKSIC, RAYMOND 5370 CUMBERLAND JACKSONVILLE, FL	L FOREST LANE		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet LEWITT, HENRY R 9007 CUMBERLAND JACKSONVILLE, FL	FOREST LANE		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	PD () Delet STECHER, KENNETH 5375 CUMBERLAND JACKSONVILLE, FL	I FOREST LANE		Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	VD () Delet ALEXA, RAY 5356 DARBY WAY JACKSONVILLE, FL			Title: () Name: Address: City-St-Zip:	Change () Addition	
Title: Name: Address: City-St-Zip:	D () Delet COLDES, TERRY 5424 CUMBERLAND JACKSONVILLE, FL	FOREST LANE		Title: () Name: Address: City-St-Zip:	Change () Addition	

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: KENNETHH STECHER PD 04/23/2004