2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N94000003021

FILED Apr 29, 2006 Secretary of State

Entity Name: BURNT STORE COLONY COUNCIL OF HOMEOWNERS, INC.

Current Principal Place of Business:			New Prince	New Principal Place of Business:		
15550 BURNT STORE RD STE 33			STE 33			
PUNTA GORDA, FL US			PUNTA G	PUNTA GORDA, FL 33955 US		
Current Mailing Address:			New Maili	New Mailing Address:		
STE 33	RNT STORE RE DRDA, FL 3395					
FEI Number:	65-0471251	FEI Number Applied For () FEI	Number Not App	pplicable () Certificate of Status Desired ()		
Name and	Address of Co	ırrent Registered Agent:	Name and	nd Address of New Registered Agent:		
5550 BÜRNT STORE RD JNIT 4 PUNTA GORDA, FL 33955 US			15550 BÜI UNIT 19	YOUNG, PATRICIA A 15550 BURNT STORE RD UNIT 19 PUNTA GORDA, FL 33955 US		
	named entity s of Florida.	ubmits this statement for the purpos	e of changing	g its registered office or registered agent, or both,		
SIGNATURE: PATRICIA A YOUNG				04/29/2006		
	Electroni	Signature of Registered Agent		Date		
OFFICERS	AND DIRECT	ORS:	ADDITION	NS/CHANGES TO OFFICERS AND DIRECTORS		
Title: Name: Address: City-St-Zip:	S () BECKER, CHER 15550 BURNT S PUNTA GORDA,	TORE RD # 196	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	P () I YOUNG, PATRIC 15550 BURNT S' PUNTA GORDA,	TORE RD # 19	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	T () BRESEE, PHILIF 15550 BURNT S PUNTA GORDA,	TORE RD #4	Title: Name: Address: City-St-Zip:	T (X) Change () Addition GRAHAM, ELAINE 15550 BURNT STORE RD #103 PUNTA GORDA, FL 33955		
Title: Name: Address: City-St-Zip:	BROWN, GARY	Delete TORE RD UNIT 99 FL 33955	Title: Name: Address: City-St-Zip:	V (X) Change () Addition BROWN, GARY 15550 BURNT STORE RD UNIT 99 PUNTA GORDA, FL 33955		
Title: Name: Address: City-St-Zip:	D () BROWN, LEILA 15550 BURNT S' PUNTA GORDA,	•	Title: Name: Address: City-St-Zip:	() Change () Addition		
Title: Name: Address: City-St-Zip:	STEVENSON, DI	TORE RD UNIT 185	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 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: PATRICIA A YOUNG P 04/29/2006