## 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## FILED Jun 08, 2006 08:00 AN

	ANNUAL	REPORT		9 (		CC4
DOCU 1. Entity Nam	MENT # N94000004			Secreta	ry of State	
BALINTORE HOMEOWNER'S ASSOCIATION, INC.						
,	•					
Principal Plac	ce of Business	Mailıny Address	l	†		
	PON WOODS BLVD.					
PALM HARB	OR, FL 34685 US	PALM HARBOR, FL 34685	US			
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		Berger Grand Germanian (	05182006 No Chg-NP			
	O NOT WRITE	CE	4. FEI Number		Applied For	
			59-3353114		Not Applicable	
		for in appear	5. Certificate of Status Des		75 Additional Required	
<u> </u>	6. Name and Address of Current R	12 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	in the second second	100	required	
DOUGHE	RTY, JOHN A	, , ,			* at firmate affirmation , require	
DOUGHE	RTY AND ASSOCIATES, L.L.C.	195°	DO NOT		٠.	
800 TARPON WOODS BLVD. PALM HARBOR, FL 34685				IN THIS	SPACE	10 10 10 10 10 10 10 10 10 10 10 10 10 1
7 7 12 10 7 17 11	(1001), 1 L 0-000		Section alone	Principle in the second		
8. The above named entity submits this statemant 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 obligat	tions of registered agent.	rie purpose or changing its registere	o onice or registe	red agent, or both, in the State	o Fiorida. Tam famili	ar with, and accept
SIGNATURE.						
Signature typed or printed name of regists, ed agent and title if applicable (NOTE Registered Ag				d when reinstating)	DATE	
	Filing Fee is \$61.25	9. Election Campaign Finan	icing \$5	.00 May Be		
D	ue by September 6, 2006	Trust Fund Contribution.		led to Fees		
10.	OFFICERS AND D	IRECTORS	to the late		V Section States	
TITLE .	DP .				The state of	
NAME STREET ADDRESS	KRALOWETZ, ROBERT 4435 SAWGRASS DRIVE		1 369	ether the second	r	***
CITY-ST-ZIP	PALM HARBOR, FL 34685		1.0	****		
TITLE	DVP		in the state of th		000566928	
NAME STREET ADDRESS	CULLEN, JUNE				'06-80 <u>00</u> 2-00:	9 61.25
CITY-ST-ZIP	3753 DORAL ST PALM HARBOR, FL 34685					
IIILE	í D		i Pales			4 ,
NAME'	WOLF, LOU	<u>.</u>	and Justing Committee	ine coi - ceres me re <del>servicios primi</del> carios servicios es	مر المستقيد إلى أو منتقد الما	— استحدد شارات
STREET ADDRESS City-St-zip	4355 SAWGRASS DR PALM HARBOR, FL 34685		1981 h	DO NOT	WRITE	
TITLE	DT DT		tite	IN THIS		ant s
NAME	STUART, KATHY			Par IIII	SPACE	
STREET ADDRESS CITY-ST-ZIP	3720 DORAL ST			<b>4</b> .	•	
TITLE	PALM HARBOR, FL 34685 DS			Programme April 1985 and 1985	ng than in the state of the sta	h, a re
NAME	WALSH, THOMAS		C. Charles		AN ALLENDER	
STREET ADDRESS	4427 SAWGRASS DRIVE		Topk De	The state of the s		, ut
City-St-ZIP	PALM HARBOR FL 34685		*16 of 2"	٠, ,	•	

12. Thereby 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 flustee empowered to execute this proof 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: ,

NAME STREET ADDRESS CITY-SI-ZIP

SIGNATURE AND TYPED OR PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

15/06

Daytime Phone #