

2004 NOT-FOR-PROFIT CORPORATION

FILED
Apr 05, 2004 8:00 am
Secretary of State

04-05-2004 90040 020 ****61.25



DOCUMENT # N 95000005976
 1. COTEE RIVER PARK HOMEOWNERS ASSOCIATION, INC.

2. 5611 Oak Ridge Avenue New Port Richey, Fl. 34652
 3. 5611 Oak Ridge Avenue New Port Richey, Fl. 34652



Chg-NP CR2E037 (10/03)

4. 59-3369378 Not Applicable

5. \$8.75 Additional Fee Required

USA

USA

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

KENNETH SCOTT
 5609 Oak Ridge Avenue
 New Port Richey, Florida 34652

FL

8. I am familiar with, and accept

Joseph A. Schalk
 Joseph A. Schalk, President

4-1-04

9.

\$5.00 May Be Added to Fees

Make check payable to Florida Department of State

10.		11.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHALK, JOSEPH A. 5611 Oak Ridge Ave. New Port Richey, Fl. 34652 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD SCHALK, JOSEPH A. 5611 Oak Ridge Ave. New Port Richey, Fl. 34652 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	FVPD RONCO, PHILIP 5703 Riverview Drive New Port Richey, Fl. 34652 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	FVPD RONCO, PHILIP 5703 Riverview Drive New Port Richey, Florida 34652 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD BASSETT, JANET 5702 Oak Ridge Avenue New Port Richey, Fl. 34652 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SVPD BASSETT, JANET 5702 Oak Ridge Avenue New Port Richey, Fl. 34652 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVPDT DeLONG, ROBERT 5648 Louisiana Avenue New Port Richey, Fl. 34652 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TVPDT DeLONG, ROBERT 5648 Louisiana Avenue New Port Richey, Fl. 34652 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCOTT, SAMUEL 5551 Oak Ridge Avenue New Port Richey, Fl. 34652 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD SCOTT, SAMUEL 5551 Oak Ridge Avenue New Port Richey, Fl. 34652 <input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

12. if made under oath; that I am an officer or director of that my name appears in Block 10 or Block 11 if

SIGNATURE: *Joseph A. Schalk* JOSEPH A. SCHALK, Pres. 4-1-04
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR