

# 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002412

FILED  
Mar 08, 2007  
Secretary of State

**Entity Name:** THE ESTUARIES-GREENS RECREATIONAL FACILITIES ASSOCIATION, INC.

**Current Principal Place of Business:**

1718 EDGEWATER LANE  
PALMETTO, FL 34221

**New Principal Place of Business:**

**Current Mailing Address:**

PO BOX 271  
PALMETTO, FL 342200271

**New Mailing Address:**

**FEI Number:** 65-0681678

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

ZOUTES, EDWARD  
2625 TERRA CEIA BAY BLVD.  
#106  
PALMETTO, FL 34221 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: DIELMAN, RAY  
Address: 2725 TERRA CEIA BAY BLVD. #208  
City-St-Zip: PALMETTO, FL 34221

Title: VD ( ) Delete  
Name: KENNELLY, GERALD  
Address: 2725 TERRA CEIA BLVD., UNIT 304  
City-St-Zip: PALMETTO, FL 34221

Title: TD ( ) Delete  
Name: DRISCOLL, CATHERINE M  
Address: 1717 EDGEWATER LN  
City-St-Zip: PALMETTO, FL 34221

Title: SD ( ) Delete  
Name: ZOUTES, EDWARD  
Address: 2625 TERRA CEIA BAY BLVD., #106  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: BARNUM, JUDY  
Address: 2909 FIDDLERS BEND  
City-St-Zip: PALMETTO, FL 34221

Title: D ( ) Delete  
Name: WAITE, SUSAN  
Address: 2625 TERRA CEIA BAY BLVD. #504  
City-St-Zip: PALMETTO, FL 34221

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

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

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

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

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

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

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

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: RAY DIELMAN

PD

03/08/2007

Electronic Signature of Signing Officer or Director

Date