

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 24, 2006 8:00 am
Secretary of State

02-24-2006 90002 003 ****70.00

DOCUMENT # N96000002673					
1. Entity Name GREEN TREE HOMEOWNERS ASSOCIATION, INC.					
Principal Place of Business PO BOX 18154 SARASOTA, FL 34276			Mailing Address PO BOX 18154 SARASOTA, FL 34276		
2. Principal Place of Business		3. Mailing Address		02092006 Chg-NP CR2E037 (11/05)	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number 65-0747801	
City & State		City & State		Applied For Not Applicable	
Zip	Country	Zip	Country	5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent			7. Name and Address of New Registered Agent		
BECKER, ROY 4075 GREEN TREE AVE SARASOTA, FL 34233			Name JERRY VOYLES Street Address (P.O. Box Number is Not Acceptable) 4103 GREEN TREE AVE City SARASOTA FL Zip Code 34233		
8. 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. I am familiar with, and accept the obligations of registered agent.					
SIGNATURE <u><i>Jerry Voyles</i></u> JERRY VOYLES <u>2-9-06</u> <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$5.00 May Be Added to Fees	
Make check payable to Florida Department of State					
10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VTD WRIGHT, BARBRA <input checked="" type="checkbox"/> Delete 4050 GREEN TREE AVE SARASOTA, FL 34238		TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition ANDREW GWILLIAM 4072 GREEN TREE AVE SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	DP <input checked="" type="checkbox"/> Delete BECKER, ROY 4075 GREEN TREE AVE SARASOTA, FL 34233		TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition JERRY VOYLES 4103 GREEN TREE AVE SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Delete ANZOLONE, FRANK 4123 GREEN TREE AVE SARASOTA, FL 34233		TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition LAVONNE MARTIN 4080 GREEN TREE AVE SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition TD JOSEPH PADULA 4039 GREEN TREE AVE SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D LISA AARON 4107 GREEN TREE AVE SARASOTA, FL 34233	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition D LEO BROWN 4111 GREEN TREE AVE SARASOTA, FL 34233	
12. I hereby 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 trustee empowered to execute this report 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: <u><i>Jerry Voyles</i></u> JERRY VOYLES <u>2-9-06</u> <u>941-342-1667</u> <small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					

ATTACHMENT

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N96000002673

1. Entity Name
GREEN TREE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business
PO BOX 18154
SARASOTA, FL 34276

Mailing Address
PO BOX 18154
SARASOTA, FL 34276

Page 2 of 2

40017350

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

02092006

Chg-NP

CR2E037 (11/05)

4. FEI Number
65-0747801

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

BECKER, ROY
4075 GREEN TREE AVE
SARASOTA, FL 34233

7. Name and Address of New Registered Agent

Name
JERRY VOYLES
Street Address (P.O. Box Number is Not Acceptable)
4103 GREEN TREE AVE
City
SARASOTA FL Zip Code
34233

8. 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. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

Jerry Voyles
Signature, typed or printed name of registered agent and title if applicable.

JERRY VOYLES
(NOTE: Registered Agent signature required when reinstating)

2-9-06
DATE

Filing Fee is \$61.25
Due by May 1, 2006

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make check payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	VTD	<input checked="" type="checkbox"/> Delete
NAME	WRIGHT, BARBRA	
STREET ADDRESS	4050 GREEN TREE AVE	
CITY-ST-ZIP	SARASOTA, FL 34238	
TITLE	DP	<input checked="" type="checkbox"/> Delete
NAME	BECKER, ROY	
STREET ADDRESS	4075 GREEN TREE AVE	
CITY-ST-ZIP	SARASOTA, FL 34233	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	ANZOLONE, FRANK	
STREET ADDRESS	4123 GREEN TREE AVE	
CITY-ST-ZIP	SARASOTA, FL 34233	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	D JIM HOFFMAN	
STREET ADDRESS	4059 GREEN TREE AVE	
CITY-ST-ZIP	SARASOTA, FL 34233	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

12. I hereby 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 trustee empowered to execute this report 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:

Jerry Voyles
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

JERRY VOYLES

2-9-06

941-342-1677

Date

Daytime Phone #