2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT (AR)**

DOCUMENT # N96000004979

THE FLORIDA CLUB PROPERTY OWNERS ASSOCIATION. INC.



Principal Place of Business Mailing Address BRISTOL MANAGEMENT SERVICES 1930 COMMERCE LANE STE 1 JUPITER FL 33458 9250 ODL ROYAL DR STUART FL 34997 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. City & State City & State

FILED Apr 20, 2006 8:00 am Secretary of State

04-20-2006 90198 050 ****61.25

1st MOORE CR2E037 (10/05) 4. FEI Number Applied For 65-0727569 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name **BRISTOL MANAGEMENT SERVICES** Street Address (P.O. Box Number is Not Acceptable) 1930 COMMERCE LANE, STE 1 JUPITER FL 33458 Zip Code 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 Signature, typed or printed name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) FILE NOW: FEE IS \$61.25 \$5.00 May Be 9. Election Campaign Financing Make Check Payable to Due By May 1, 2006 Trust Fund Contribution. Florida Department of State Added to Fees The fact of the second OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10 11. PD ППЕ TITLE ☐ Delete ☐ Channe ☐ Addition CHICONE, FRANCIS NAME NAME STREET ADDRESS 1433 SW BALMORAL TRACE STREET ADDRESS STUART FL 34997 CITY-ST-ZIP CITY - ST - Z(F TD TITLE ☐ Delete TITLE ☐ Change ☐ Addition BOLAND, BRENDA NAME NAME 1309 SW EAGLEN PLACE STREET ADDRESS STREET ADDRESS STUART FL 34997 CITY-ST-ZIP CITY-ST-ZIP VP TITLE Delete. TITLE Addition NAME KĀHN, ALAN NAME POLIS BROMELIA TERR 901 SW BLUE STEM WAY STREET ADDRESS STREET ADDRESS ŚW STUART FL 34997 CITY-ST-ZIP CITY-ST-ZIP STURGET Addition X Change TOTALE **D**elete TITLE SHANNON, NANCY E NAME NAME アのひん JOHNSTON 8663 SW CRUDEN BAY COURT STREET ADDRESS STREET ADDRESS SW BALMORAL CITY-ST-ZIP STUART FL 34997 CITY-ST-ZIP ☐ Delete ☐ Change ☐ Addition TITLE NAME NAME STREET ADDRESS STREET ADDRESS CITY - ST - ZIP CITY-ST-ZIP ☐ Change TITLE ☐ Delete TITLE Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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:

3-31-06