2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N9700000138

FILED Apr 27, 2004 Secretary of State

Entity Name: COURTLEA OAKS HOMEOWNERS ASSOCIATION, INC.

New Principal Place of Business: Current Principal Place of Business: 882 JACKSON AVE WINTER PARK, FL 32789 **Current Mailing Address: New Mailing Address:** 882 JACKSON AVE WINTER PARK, FL 32789 FEI Number: 59-3576017 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired () Name and Address of Current Registered Agent: Name and Address of New Registered Agent: JORDAN, BRETT M 882 JACKSON AVE WINTER PARK, FL 32789 US 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:** ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS: () Delete (X) Change () Addition BRADFORD, MW MARTIN, MITCH Name: Name: 111 MERICAM CT Address: 466 FOREST HAVEN DRIVE Address: City-St-Zip: WINTER GARDEN, FL 34777 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: () Change () Addition ELLSWORTH, JOHN Name: Name: Address: 412 COURLEA OAKS BLVD. Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: Title: () Delete Title: SD (X) Change () Addition GRIMES, STEVEN GRIMES, STEVEN Name: Name: 464 FOREST HAVEN DRIVE 464 FOREST HAVEN DRIVE Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787 Title: () Delete Title: () Change () Addition Name: MEYER, BILL Name: 326 FOREST HAVEN DRIVE Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: Title: () Delete Title: (X) Change () Addition SPEARS, ROY BRUCE, JEM Name: Name: 760 FOREST HAVEN DRIVE 462 VALLEY VIEW DRIVE Address: Address: City-St-Zip: WINTER GARDEN, FL 34787 City-St-Zip: WINTER GARDEN, FL 34787 Title: (X) Delete Title: () Change () Addition SANFORD, CARL Name: Name: Address: 308 FOREST HAVEN DRIVE Address: WINTER GARDEN, FL 34787 City-St-Zip: City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), 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: STEVEN GRIMES SD 04/27/2004