

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000000138

FILED  
Apr 25, 2006  
Secretary of State

**Entity Name:** COURTLEA OAKS HOMEOWNERS ASSOCIATION, INC.

**Current Principal Place of Business:**

882 JACKSON AVE  
WINTER PARK, FL 32789

**New Principal Place of Business:**

**Current Mailing Address:**

882 JACKSON AVE  
WINTER PARK, FL 32789

**New Mailing Address:**

**FEI Number:** 59-3576017

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

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

JORDAN, BRETT M  
882 JACKSON AVE  
WINTER PARK, FL 32789 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: DUFFY, DIANNA  
Address: 454 VALLEY VIEW DRIVE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: VD ( ) Delete  
Name: EVANS, BOB  
Address: 410 COURLEA OAKS BLVD.  
City-St-Zip: WINTER GARDEN, FL 34787

Title: STD ( ) Delete  
Name: CALNON, MIKE  
Address: 406 COURTLEA OAKS BLVD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: D ( ) Delete  
Name: SWAFFORD, WALT  
Address: 315 COURTLEA OAKS BLVD  
City-St-Zip: WINTER GARDEN, FL 34787

Title: ( ) Delete  
Name:  
Address:  
City-St-Zip:

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

Title: VD (X) Change ( ) Addition  
Name: DUFFY, DIANNA  
Address: 454 VALLEY VIEW DRIVE  
City-St-Zip: WINTER GARDEN, FL 34787

Title: PD (X) Change ( ) Addition  
Name: EVANS, BOB  
Address: 410 COURLEA OAKS BLVD.  
City-St-Zip: WINTER GARDEN, FL 34787

Title: SD (X) Change ( ) Addition  
Name: KULAKOWSKI, ARLENE  
Address: 409 COURTLEA OAKS BLVD  
City-St-Zip: WINTER GARDEN, FL 34787

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

Title: D ( ) Change (X) Addition  
Name: FITZPATRICK, DAN  
Address: 326 FOREST HAVEN  
City-St-Zip: WINTER GARDEN, FL 34787

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: BOB EVANS

PD

04/25/2006

Electronic Signature of Signing Officer or Director

Date