2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N97000004398

FILED Apr 27, 2004 Secretary of State

Entity Name: COYTABA DRIVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Plac	New Principal Place of Business:	
	TOBA DRIVE , FL 32566				
Current Mailing Address:			New Mailing Addre	New Mailing Address:	
	TOBA DRIVE , FL 32566				
FEI Number:	59-3525941	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of	Current Registered Agent:	Name and Address	s of New Registered Agent:	
	, TODD TOBA DRIVE I, FL 32566	US			
	named entity of Florida.	submits this statement for the pu	urpose of changing its registe	ered office or registered agent, or both,	
SIGNATUF	RE:				
	Electro	nic Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAN	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	D (PATTON, OSC 7317 COYTOI NAVARRE, FL	BA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (PATTON, RAN 7325 COYTOI NAVARRE, FL	BA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (THOAMS, DAI 7324 COYTOI NAVARRE, FL	BA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (TUBBS, DYW 7333 COYTOI NAVARRE, FL	BA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (PERKINS, CH 7341 CAYTOE NAVARRE, FL	BA DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	D (CARROLL, TO 7316 COYTOI NAVARRE, FL	BA DRIVE	Title: Name: Address: City-St-Zip:	()Change ()Addition	

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: TODD CARROLL D 04/27/2004