2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 29, 2007
Secretary of State

DOCUMENT# N97000004398

Entity Name: COYTABA DRIVE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

7324 COYTOBA DRIVE
NAVARRE, FL 32566

New Principal Place of Business:

Current Mailing Address:

7324 COYTOBA DRIVE
NAVARRE, FL 32566

New Mailing Address:

FEI Number: 59-3525941 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

THOMAS, HERMAN D JR.
7324 COYTOBA DRIVE
NAVARRE, FL 32566 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:	D	( ) Delete
Name:	PATTON, OSCAR L	
Address:	7317 COYTOBA DRIVE	
City-St-Zip:	NAVARRE, FL 32566	
Title:	D	( ) Delete
Name:	PATTON, RANDAL L	
Address:	7325 COYTOBA DRIVE	
City-St-Zip:	NAVARRE, FL 32566	
Title:	D	( ) Delete
Name:	THOMAS, HERMAN D JR.	
Address:	7324 COYTOBA DRIVE	
City-St-Zip:	NAVARRE, FL 32566	
Title:	D	( ) Delete
Name:	STEVE, HULTMAN	
Address:	7333 COYTOBA DRIVE	
City-St-Zip:	NAVARRE, FL 32566	
Title:	D	( ) Delete
Name:	PATTON, RICHARD	
Address:	7341 COYTOBA DRIVE	
City-St-Zip:	NAVARRE, FL 32566	
Title:	D	( ) Delete
Name:	RUSHING, LESTER E III	
Address:	7316 COYTOBA DRIVE	
City-St-Zip:	NAVARRE, FL 32566	

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

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

I hereby certify that the information supplied with this filing does not qualify 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: DALE THOMAS D 04/29/2007
Electronic Signature of Signing Officer or Director — Date