## 2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

## DOCUMENT# N98000002267

FILED Jan 09, 2007 Secretary of State

Entity Name: BENT TREE OWNERS' ASSOCIATION INC

Entity Nar	ME: BENTIREE	DWNERS ASSOCIATION	, INC.				
Current Principal Place of Business:			New Princ	New Principal Place of Business:			
PO BOX 1153 MARY ESTHER, FL 32569 US				966 JOHN WAYNE C IRCLE FORT WALTON BEACH, FL 32547 US			
Current Mailing Address:			New Mailing Address:				
PO BOX 1° MARY EST	153 THER, FL 32569	US					
FEI Number:	: FE	El Number Applied For()	FEI Number Not Appl	icable (X) Co	ertificate of Status I	Desired ( )	
Name and Address of Current Registered Agent:			Name and	Name and Address of New Registered Agent:			
FORT WA	WAYNE CIRCLE LTON BEACH, FL	32547 US	ourpose of changing it	ts registered offic	e or registered a	gent, or both,	
	e of Florida.	, , , , , , , ,.		· · · <b>9</b> · · · · · · ·	· · · · · · · · · · · · · · · · · ·	<b>3</b> ,,	
SIGNATUF		inneton of Desistend And			Data		
OFFICER		ignature of Registered Age		CICHANCES TO	Date	D DIDECTORS	
	S AND DIRECTOR				OFFICERS AN	D DIRECTORS:	
Title: Name: Address: City-St-Zip:	PD () Dele KARLEY, ERIC 966 JOHN WAYNE C FORT WALTON BEA	CIRCLE	Title: Name: Address: City-St-Zip:	( ) Ch	ange ( ) Addition		
Title: Name: Address: City-St-Zip:	VPD () Dele MASLANKA, EDWAF 954 JOHN WAYNE O FORT WALTON BEA	RD CIRCLE	Title: Name: Address: City-St-Zip:	( ) Ch	ange()Addition		
Title: Name: Address: City-St-Zip:	T () Dele LAMBETH, MARY 959 JOHN WAYNE O FORT WALTON BEA	CIRCLE	Title: Name: Address: City-St-Zip:	T (X) Ch LITSO, ANGELA 990 JOHN WAYNE	nange ( ) Addition		
Title:				FORT WALTON BE	EACH, FL 32547		

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: ERIC KARLEY PRES 01/09/2007