2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N99000001661

FILED Mar 13, 2007 Secretary of State

Entity Name: COBBLESTONE PROPERTY OWNER'S ASSOCIATION, INC.

Current Principal Place of Business: New Principal Place of Business:

6479 53RD CIRCLE 6407 53RD CIRCLE VERO BEACH, FL 32967 VERO BEACH, FL 32967

Current Mailing Address: New Mailing Address:

6479 53RD CIRCLE 6407 53RD CIRCLE VERO BEACH, FL 32967 VERO BEACH, FL 32967

FEI Number: 65-0953689 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:

NICOLACE, EDWARD PETERSON, MARK 6479 53RD CIRCLE 6407 53RD CIRCLE VERO BEACH, FL 32967 VERO BEACH, FL 32967 US 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: MARK PETERSON 03/13/2007

> Electronic Signature of Registered Agent Date

> > Title:

OFFICERS AND DIRECTORS:

() Delete

Title:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

(X) Change () Addition () Delete BINKLEY, JOHN BINKLEY, JOHN VP Name: Name:

6475 53RD CIRCLE Address: 6475 53RD CIRCLE Address: City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: VERO BEACH, FL 32967

(X) Change () Addition NICOLACE, EDWARD Name: PETERSON, MARK P Name: Address: 6479 53RD CIRCLE Address: 6479 53RD CIRCLE City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: VERO BEACH, FL 32967

Title: **VPSD** () Delete Title: **VPSD** (X) Change () Addition Name:

SHISHLER, GEOFF WALLACE, KYM S Name: Address: 6455 53RD CIRCLE Address: 6489 53RD CIRCLE City-St-Zip: VERO BEACH, FL 32967 City-St-Zip: VERO BEACH, FL 32967

Title: DP (X) Delete Title: () Change () Addition

NICOLACE, EDWARD Name: Name: 6469 53RD CIRCLE Address: Address: City-St-Zip: VERO BEACH, FL 32967 City-St-Zip:

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: MARK PETERSON **PRES** 03/13/2007