


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 28, 2005 8:00 am**  
**Secretary of State**

03-28-2005 90061 010 \*\*\*\*61.25

|  |   |   |   |  |  |
|--|---|---|---|--|--|
| <b>DOCUMENT # 732433</b>   |   |   |   |         |  |
| 1. Entity Name<br>PRAIRIE CREEK PARK PROPERTY OWNERS ASSOCIATION, INC.   |   |   |   |  |  |
| Principal Place of Business<br><del>18151 WILD PEPPER CT</del><br><del>PUNTA GORDA, FL 33982</del>   |   | Mailing Address<br>PO BOX 511022<br>PUNTA GORDA, FL 33951-1022                      |   |  |  |
| 2. Principal Place of Business<br>15651 PRAIRIE CREEK BLVD   |   | 3. Mailing Address  |   |  |  |
| Suite, Apt. #, etc.  |   | Suite, Apt. #, etc.   |   |  |  |
| City & State<br>PUNTA GORDA, FL  |   | City & State  |   | 4. FEI Number<br>59-2325604  |  |
| Zip<br>33982   |   | Country   |   | 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required |  |
| 6. Name and Address of Current Registered Agent<br>POLK, JOHN I<br>141 W MARTIN AVE<br>PUNTA GORDA, FL 33950   |   |   | 7. Name and Address of New Registered Agent<br>Name: R & A Agents, Inc.<br>Street Address (P.O. Box Number is Not Acceptable):<br>Attn: Steven M. Falk Esq.<br>850 Park Shore Drive, 3rd Floor<br>City: Naples FL Zip Code: 33903 |  |  |
| 8. 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. I am familiar with, and accept the obligations of registered agent.<br>SIGNATURE BY: <i>Steven M. Falk</i> Its Secretary<br>Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE   |   |   |   |  |  |
| Filing Fee is \$61.25<br>Due by May 1, 2005  |   | 9. Election Campaign Financing<br>Trust Fund Contribution. <input type="checkbox"/> |   | \$5.00 May Be Added to Fees<br>Make check payable to Florida Department of State         |  |
| 10. OFFICERS AND DIRECTORS   |   |   | 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10   |  |  |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | P<br>JEANNE<br>REGO, JEANNIE<br>16250 RIDGEWOOD CT<br>PUNTA GORDA, FL 33982 | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | T<br>KINDLE, CHARLES<br>6000 CYPRESS GROVE CIRCLE<br>PUNTA GORDA, FL 33982-9531          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | S<br>SPRAGUE, PARKE<br>PO BOX 54<br>DANVILLE, IN 46122                      | <input checked="" type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | S<br>FREELAND, SANDY<br>3105 HIDDEN VALLEY CIRCLE<br>PUNTA GORDA, FL 33982               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | D<br>SLEAR, JACK<br>3100 HIDDEN VALLEY CIRCLE<br>PUNTA GORDA, FL 33982      | <input checked="" type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>ZIMMERSCHIED, JEANNINE<br>17801 PRAIRIE CREEK BLVD<br>PUNTA GORDA, FL 33982         | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | D<br>MUSGRAVE, THOMAS<br>3900 HIDDEN VALLEY CIR<br>PUNTA GORDA, FL 33982    | <input checked="" type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>WINFREY, ROBERT<br>4951 CYPRESS GROVE CIRCLE<br>PUNTA GORDA, FL 33982               | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | D<br>EVANS, GARY<br>5901 CYPRESS GROVE CIR<br>PUNTA GORDA, FL 33982         | <input checked="" type="checkbox"/> Delete  | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  | D<br>OACK, IAN<br>16100 WILDWOOD COURT<br>PUNTA GORDA, FL 33982                          | <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP   | VP<br>GATES, LELAND<br>5301 CYPRESS GROVE CIR<br>PUNTA GORDA, FL 33950      | <input type="checkbox"/> Delete   | TITLE<br>NAME<br>STREET ADDRESS<br>CITY-ST-ZIP  |  | <input type="checkbox"/> Change <input type="checkbox"/> Addition            |
| 12. I hereby certify that the information supplied with this filing does not qualify 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 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 in Block 10 or Block 11 if changed, or on an attachment with an address, with all other names empowered. |   |   |   |  |  |
| SIGNATURE: <i>Charles Kindle</i> / CHARLES KINDLE  |   | Date: 2/28/2005   |   | Daytime Phone #: 941 575 1207  |  |
| SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   |   |   |   |  |  |