


2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jun 21, 2005 8:00 am
Secretary of State

06-21-2005 90004 005 ****61.25

DOCUMENT # 767922

1. Entity Name
K AND K PARK TENANTS' ASSOCIATION, INC.



Principal Place of Business
**C/O IRWIN ACC'T & TAX SERV
 4911 14TH ST W
 BRADENTON, FL 34207**

Mailing Address
**C/O IRWIN ACC'T & TAX SERV
 4911 14TH ST W
 BRADENTON, FL 34207**



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip Country

06152005 Chg-NP GR2E037 (10/03)

4. FEI Number
59-2377553

Applied For
 Not Applicable

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

**RUSSELL, RINGLAND
 4918 14 ST W B-7
 BRADENTON, FL 34207**

7. Name and Address of New Registered Agent

Name
 Street Address (P.O. Box Number is Not Acceptable)
 City **FL** Zip Code

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.

SIGNATURE _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

**Filing Fee is \$61.25
 Due by September 7, 2005**

9. Election Campaign Financing Trust Fund Contribution. **\$5.00** May Be Added to Fees

Make check payable to Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> Delete
NAME	RINGLAND, RUSSELL	
STREET ADDRESS	4918 - 14 STREET W-B7	
CITY-ST-ZIP	BRADENTON, FL 34207	
TITLE	VPD	<input type="checkbox"/> Delete
NAME	BUCK, WILLIAM	
STREET ADDRESS	4918- 14TH ST W- A12	
CITY-ST-ZIP	BRADENTON, FL 34207	
TITLE	SD	<input checked="" type="checkbox"/> Delete
NAME	ESTOCK, JOY	
STREET ADDRESS	4918-14TH ST W H2	
CITY-ST-ZIP	BRADENTON, FL 34207	
TITLE	TD	<input type="checkbox"/> Delete
NAME	MCPHERSON, BETTY	
STREET ADDRESS	4918 - 14 STREET W A9	
CITY-ST-ZIP	BRADENTON, FL	
TITLE	SDTD	<input checked="" type="checkbox"/> Delete
NAME	MANDELL, ALMA	
STREET ADDRESS	4918 - 14TH ST W, C3	
CITY-ST-ZIP	BRADENTON, FL 34207	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Snyder, Leslie	
STREET ADDRESS	4918-14th St W-A18	
CITY-ST-ZIP	Bradenton, FL 34207	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE	SDTD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Levard, Robert	
STREET ADDRESS	4918-14th St W-E8	
CITY-ST-ZIP	Bradenton, FL 34207	
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

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 like empowered.

SIGNATURE: Russell Ringland 16 June 05
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #

Russell Ringland