

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

FILED
Mar 17, 2005 08:00 AM
Secretary of State

DOCUMENT # N93000003295

1. Entity Name
**VALLEY VIEW TERRACE WEST PROPERTY OWNERS'
ASSOCIATION, INC.**



Principal Place of Business
**3120 BIG VALLEY DR
LAKELAND, FL 33813 US**

Mailing Address
**3120 BIG VALLEY DR
LAKELAND, FL 33813 US**



03142005 No Chg-NP CR2E037 (10/03)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3232095

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

**OSWALD, LORI
3120 BIG VALLEY DR
LAKELAND, FL 33813**

**DO NOT WRITE
IN THIS SPACE**

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 *Lori Oswald Treasurer*

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

3-15-05
DATE

**Filing Fee is \$61.25
Due by May 1, 2005**

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

10. OFFICERS AND DIRECTORS

| | |
|----------------|--------------------|
| TITLE | P |
| NAME | DAIGLE, ROB |
| STREET ADDRESS | 3140 BIG VALLEY DR |
| CITY-ST-ZIP | LAKELAND, FL 33813 |
| TITLE | S |
| NAME | SCOTT, WENDY |
| STREET ADDRESS | 3101 BIG VALLEY DR |
| CITY-ST-ZIP | LAKELAND, FL 33813 |
| TITLE | T |
| NAME | OSWALD, LORI |
| STREET ADDRESS | 3120 BIG VALLEY DR |
| CITY-ST-ZIP | LAKELAND, FL 33813 |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |
| TITLE | |
| NAME | |
| STREET ADDRESS | |
| CITY-ST-ZIP | |

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03/17/05-80010-006 61.25

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: *Lori Oswald*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3-15-05 863-647-2823
Date Daytime Phone #