

2018 FLORIDA NOT FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N96000002800

Entity Name: HOME OWNERS OF ALLIGATOR PARK, INCORPORATED**Current Principal Place of Business:**6400 TAYLOR RD
SUITE 112
PUNTA GORDA, FL 33950**Current Mailing Address:**6400 TAYLOR RD
SUITE 112
PUNTA GORDA, FL 33950 US**FEI Number:** 59-2530292**Certificate of Status Desired:** Yes**Name and Address of Current Registered Agent:**WOTITZKY, EDWARD ESQ
WOTITZKY LAW FIRM
1107 W MARION AVE UNIT 111
PUNTA GORDA, FL 33950 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:** EDWARD L. WOTITZKY

02/19/2018

Electronic Signature of Registered Agent

Date

Officer/Director Detail :

Title PD
Name GARROW, RICHARD
Address 6400 TAYLOR RD 241
City-State-Zip: PUNTA GORDA FL 33950

Title TD
Name WILLIAMS, ALFON A
Address 6400 TAYLOR RD 215
City-State-Zip: PUNTA GORDA FL 33950

Title SD
Name LITCHFIELD, NOREEN
Address 6400 TAYLOR RD 207
City-State-Zip: PUNTA GORDA FL 33950

Title VD
Name HURRY, WILLIAM
Address 6400 TAYLOR RD 278
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name KOZLOWSKI, JAMES
Address 6400 TAYLOR RD 1329
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name DAVIS, CHARLENE K
Address 6400 TAYLOR RD A-8
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name HEDDEN, HENRY
Address 6400 TAYLOR RD 155
City-State-Zip: PUNTA GORDA FL 33950

Title DIRECTOR
Name WALKER, PATRICIA
Address 6400 TAYLOR A-18
City-State-Zip: PUNTA GORDA FL 33950

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I hereby 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 all other like empowered.

SIGNATURE: RICHARD GARROW

PRESIDENT

02/19/2018

Electronic Signature of Signing Officer/Director Detail

Date

Officer/Director Detail Continued :

Title	DIRECTOR
Name	STOUT, JODONNA I
Address	27850 LEATHERWOOD CIR
City-State-Zip:	PUNTA GORDA FL 33950