2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED Feb 06, 2004 8:00 am Secretary of State

DOCUMENT # 702575 1. Entity Name CROOKED LAKE PARK ASSOCIATION, INC.							90001 032 * ⁻	***61.25
Principal Place of Business Mailing Address 233 CENTRAL DR . 252 CANAL DRIVE LAKE WALES, FL 33853 US LAKE WALES, FL 33853								
2. Principal Place of Business		3. Mailing Address					\$	
∑ Suite, Apt. #, etc.		Suite, Apt. #, etc.		C	01162004 Ch	g-NP	CR2E037 (10	(03)
City & State		City & State		· 4.	. FEI Number 59-234908	1		Applied For Not Applicable
Zip	Country	Zìp	Country	5.	. Certificate of Sta	tus Desired		5 Additional . equired
	6. Name and Address of Current	t Registered Agent	N	7.	. Name and Addr	ess of New Re	egistered Agent	
HUNT, D. ANDREW			Name	Name				
				ddress (P.O.	. Box Number is N	ot Acceptable)	
			City				FL Zi	Code
9. The shows	parmed entity submits this statement f	or the purpose of changing its	registered office o	r registered r	agent or both in t	ha Stata of Elai		ruith and accept
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 SIgnature, typed or primed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE								
Filing Fee is \$61.25 Due by May 1, 2004 9. Election Campaign Financing \$5.00 May Be Due by May 1, 2004 9. Election Campaign Financing \$5.00 May Be Added to Fees Florida Department of State								
	Due by May 1, 2004	Trust Fund Co	entribution.	L.J Ade	Ided to Fees	Flori	da Department	of State
10.	Due by May 1, 2004 OFFICERS AND D	Trust Fund Co	ontribution.	LJ Add	Ided to Fees	Flori S TO OFFICE	da Department	of State .
TITLE	Due by May 1, 2004 OFFICERS AND D	Trust Fund Co	11.	LJ Add	Ided to Fees DITIONS/CHANGE	Flori S TO OFFICER	da Department	of State .
	Due by May 1, 2004 OFFICERS AND D	Trust Fund Co	ontribution.	ADD ADD	Ided to Fees DITIONS/CHANGE	Flori S TO OFFICEF MME	da Department RS AND DIRECTO 这 C	PRS IN 10 Addition
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12. I hereby certify that the information supplied with this filling 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:

SGARLIAGA LUCY SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR /26/04 863-638-3000

FLORIDA DEPARTMENT OF STATE Glenda E. Hood Secretary of State

January 16, 2004

CROOKED LAKE PARK ASSOCIATION, INC. 252 CANAL DRIVE LAKE WALES, FL 33853

SUBJECT: CROOKED LAKE PARK ASSOCIATION, INC. Ref. Number: 702575

Please be advised, we have received your annual report/uniform business report; however, the report has not been filed and a copy is being returned for the following correction(s):

The form submitted is not suitable for archiving. Please complete the enclosed form and return to our office.

After the corrections have been made, please return the report to: Division of Corporations, Annual Report/Uniform Business Report Section, P.O. Box 6327, Tallahassee, Florida 32314 within 30 days from the date of this letter.

If you have any questions concerning the filing of your document, please call (850) 245-6059.

Tyrone Scott Document Specialist

Letter Number: 904A00003158