

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 02, 2007 8:00 am
Secretary of State

04-02-2007 90060 029 ****61.25

DOCUMENT # 744746 1. Entity Name GASPAR'S HIDEAWAY OWNERS ASSOCIATION, INC.					
Principal Place of Business P.O. BOX 683 PLACIDA FL 33946 US			Mailing Address P.O. BOX 683 PLACIDA FL 33946 US		
2. Principal Place of Business - No P.O. Box #		3. Mailing Address			
Suite, Apt. #, etc.		Suite, Apt. #, etc.			
City & State		City & State		4. FEI Number 59-2812796	
Zip		Country		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent VETTER, EDWIN A DR 3110 CARLETON CIR E LAKELAND FL 33803			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 _____ Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when registering)					
FILE NOW: FEE IS \$61.25 Due By May 1, 2007		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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☒ Delete HUBBERT, SEWEL P O BOX 802 PLACIDA FL 33946	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☒ Addition Bobby Loos 1018 Chingberry Rd Clearwater, FL 33764		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete S THOMPSON, CHRISTA 3115 CARLETON CIR. W. LAKELAND FL 33803	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete T VETTER, EDWIN 3110 CARLETON CIR E LAKELAND FL 33803	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete D OLESON, DON 402 STRATFORD MANOR DR BRANDON FL 33510	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition		
TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Delete	TITLE NAME STREET ADDRESS CITY-STATE-ZIP	☐ Change ☐ Addition		
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: <i>Ed Vetter</i> Ed Vetter 2-18-07 863 534 4194					
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					