

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 07, 2005 8:00 am
Secretary of State

02-07-2005 90073 012 ****61.25

DOCUMENT # 757623

1. Entity Name

COLLEGE PARK CONDOMINIUM OWNERS' ASSOCIATION, INC.,



Principal Place of Business

201 COLLEGE BLVD.
NICEVILLE FL 32578-1350

Mailing Address

201 COLLEGE BLVD.
NICEVILLE FL 32578-1350

40014439



1st MOORE

CR2E037 (10/04)

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

4. FEI Number

59-2127070

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

NEMETH, KIMBERLY A Nemeth Neumans
1031 AIDER WOOD WAY
NICEVILLE FL 32578

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

Kim Nemeth Neumans

(NOTE: Registered Agent signature required when reinstating)

DATE

2/1/05

FILE NOW: FEE IS \$61.25
Due By May 1, 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	S	<input checked="" type="checkbox"/> Delete
NAME	HADDOCK, EGIDIA	
STREET ADDRESS	4269 SHADOW LANE	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	SMITH, CHARLES	
STREET ADDRESS	201 E. COLLECTE BLVD #11	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	D	<input type="checkbox"/> Delete
NAME	KAPLAN, DAVE	
STREET ADDRESS	907 E CHOCTOWHATCHEE DR.	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	DMT	<input type="checkbox"/> Delete
NAME	NEMETH NEUMANS, KIM	
STREET ADDRESS	1031 ALDERWOOD WAY	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	D	<input type="checkbox"/> Delete
NAME	BHATTACHARYA, JAY	
STREET ADDRESS	107 COUNTRY CLUB DR.	
CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	D	<input type="checkbox"/> Delete
NAME	LOGAN, BOBBIE	
STREET ADDRESS	478 OLDE POST RD.	
CITY-ST-ZIP	NICEVILLE FL 32578	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Kevin Jackson	
STREET ADDRESS	201 E. College Blvd. #53	
CITY-ST-ZIP	Niceville, FL 32578	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jacob Gunn	
STREET ADDRESS	1601 Date Palm Dr.	
CITY-ST-ZIP	Niceville, FL 32578	
TITLE	V	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Jesus Rodriguez	
STREET ADDRESS	1016 Countryside Ct.	
CITY-ST-ZIP	FWB., FL 32547	
TITLE	DMT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Kim Nemeth Neumans	
STREET ADDRESS	1031 Alderwood Way	
CITY-ST-ZIP	Niceville, FL 32578	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Jay Bhattacharya	
STREET ADDRESS	4217 Shadow Lane	
CITY-ST-ZIP	Niceville, FL 32578	
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:

Kim Nemeth Neumans

Kim Nemeth Neumans

DATE

2/1/05

850-729-7888

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #