2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 08, 2004 8:00 am
Secretary of State
04-08-2004 90027 028 ****61.25

DOCUMENT # 761738

1. Entity Name

ALLIGATOR PARK ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6400 TAYLOR RD A8 ~~#203~~ PUNTA GORDA FL 33950 US	6400 TAYLOR RD A8 ~~#203~~ PUNTA GORDA FL 33950 US

MOORE CR2E037 (11/03)

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 NO-T APPLICABLE ☐ Applied For ☐ Not Applicable

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

6. Name and Address of Current Registered Agent

ROOK, ESTHEN
6400 TAYLOR RD A 8
~~#203~~
PUNTA GORDA FL 33950

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 Esther B. Rook Esther B. Rook
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25
Due By May 1, 2004

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 T NAME STREET ADDRESS CITY-ST-ZIP	T ROOK, TESTHER 6400 TAYLOR RD # A8 PUNTA GORDA FL 33950	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition Marian Besaw 6400 TAylor RD 159 TARPON Punta Gorda 33950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D POWELL, GLORIA 6400 TAYLOR RD, STE 203 PUNTA GORDA FL 33950	☒ Delete	TITLE S NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition Elaine Johnson 6400 TAylor RD 88 N. Cardinal Punta Gorda Fl 33950
TITLE VP NAME STREET ADDRESS CITY-ST-ZIP	D BESAW, JAMES 6408 TAYLOR RD STE 159 PUNTA GORDA FL 33950	☐ Delete	TITLE P NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition Delores COTTOM 154 TARPON 6400 TAylor Rd. PUNTA Gorda 33950
TITLE D NAME STREET ADDRESS CITY-ST-ZIP	D MAGYAR, PEARL P 6400 TAYLOR RD # A 17 PUNTA GORDA FL 33950	☐ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition KAY ATHERTON 6400 TAylor RD #101 Punta Gorda Fl. 33950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KUHN, FRAN 6400 TAYLOR RD, STE 215 PUNTA GORDA FL 33950	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition EVELYN DRAKE 6400 TAylor RD Punta Gorda Fl. 33950
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP GILBERT, ED 6400 TAYLOR RD, 513 PUNTA GORDA FL	☒ Delete	TITLE D NAME STREET ADDRESS CITY-ST-ZIP	☐ Change ☐ Addition ART & Bev. HAYEK 6400 TAylor RD Punta Gorda Fl 33950

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: Esther B. Rook 4-3-04 941-637-1683
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #