

**2007 FOR PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 12, 2007 08:00 AM
Secretary of State

DOCUMENT # F00000005910

1. Entity Name

CHEROKEE PARK LIMITED, INC.



Principal Place of Business

1900 RINGLING BLVD
SARASOTA, FL 34236

Mailing Address

1900 RINGLING BLVD
SARASOTA, FL 34236



01052007 No Chg-P CR2E034 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number

98-0230476

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DUMBAUGH, JOHN D
1900 RINGLING BLVD
SARASOTA, FL 34236

**DO NOT WRITE
IN THIS SPACE**

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 reinstating)

DATE

FILE NOW!!! FEE IS \$150.00
After May 1, 2007 Fee will be \$550.00

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

U00000584531
01/12/07-80040-018 150.00

10. OFFICERS AND DIRECTORS

TITLE	CP
NAME	BELL, MIKE
STREET ADDRESS	1900 RINGLING BLVD
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	DVP
NAME	DUMBAUGH, JOHN
STREET ADDRESS	1900 RINGLING BLVD
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	DVPS
NAME	DUMBAUGH, BARBARA
STREET ADDRESS	1900 RINGLING BLVD
CITY-ST-ZIP	SARASOTA, FL 34236
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 607, 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:

John D. Dumbaugh V.P.
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-5-07

Date

941-365-7171

Daytime Phone #