

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

FILED
Mar 14, 2005 8:00 am
Secretary of State

03-14-2005 90087 030 ****61.25

DOCUMENT # N03000002483

1. Entity Name

**JOLLY ROGER TRAVEL PARK HOMEOWNERS
ASSOCIATION, INC.**



Principal Place of Business

**59241 OVERSEAS HIGHWAY
LOT 101
MARATHON FL 33050**

Mailing Address

**L. HEYMAN
59241 OVERSEAS HIGHWAY LOT 101
MARATHON FL 33050**

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

57-1168644

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**CINTRON, ROBERT JR.
317 WHITEHEAD STREET
KEY WEST FL 33040**

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 reinstating)

DATE

**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	P	<input type="checkbox"/> Delete
NAME	GRAHAM, WILLIAM	
STREET ADDRESS	59241 OVERSEAS HWY LOT 101	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	VP	<input type="checkbox"/> Delete
NAME	BROWN, CHARLENE	
STREET ADDRESS	59241 OVERSEAS HWY LOT 71	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	ST	<input type="checkbox"/> Delete
NAME	HEYMAN, LOUISE L	
STREET ADDRESS	59241 OVERSEAS HWY LOT 89	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	D	<input type="checkbox"/> Delete
NAME	SWARTSTROM, JAMES	
STREET ADDRESS	59241 OVERSEAS HWY LOT 91	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	MILLER, GARY	
STREET ADDRESS	59241 OVERSEAS HWY LOT 15	
CITY-ST-ZIP	MARATHON FL 33050	
TITLE		<input type="checkbox"/> Delete
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lorraine Timko	
STREET ADDRESS	59241 Overseas Hwy Lot 2A	
CITY-ST-ZIP	Marathon, FL 33050	
TITLE		<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Stere Nichel	
STREET ADDRESS	59241 Overseas Hwy Lot 23	
CITY-ST-ZIP	Marathon, FL 33050	
TITLE		<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Louise L. Heymen	
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
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: *Louise L. Heymen*
Louise L. Heymen SD
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/05 305-743-3285
Date Daytime Phone #