## 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N03000003793

## FILED Feb 09, 2005 8:00 am Secretary of State

02-09-2005 90052 040 \*\*\*\*61.25

1. Entity Nam JASMINE	POINTE AT CAR	RLTON LAKES (	COMMONS, IN	с.			İ				
C/O PEGASUS PROPERTY MANAGEMENT C/O 17595 S. TAMIAMI TRAIL, SUITE 100 17:			ling Address D PEGASUS PROPERTY MANAGEMENT 595 S. TAMIAMI TRAIL, SUITE 100 RT MYERS, FL 33908					401 <b>(1</b> 111 <b>(11</b> 14 <b>(14</b>		01266	
2. Principal Place of Business 3. Ma			Mailing Address								
Suite, Apt. #, etc.			Suite, Apt. #, etc.				01052005 CI	ng-NP	CR2E03	37 (10/03)	
City & State			City & State				4. FEI Number 33-108555	4			plied For t Applicable
Zip	Zip Country		Zìp		Country		5. Certificate of St	atus Desired		\$8.75 Add Fee Required	
	6. Name and Addres	ss of Current Register	red Agent				7. Name and Add	ress of New F	Registered A	Agent	
	BOURGEAU & DA					17	Corpora		Sys	stem	<u>rs</u>
2375 TAMIAMI TRAIL N SUITE 308					Street Address (P.O. Box Number is Not Acceptable), 1200 South Pine Island Road						
NAPLES, F	FL 34103					Surt	o 25	<u>\( \)</u>	7in Code		
The above named entity submits this statement for the purpose of changing its registered of							ntation	•	FL	النافقا	<u> 324</u>
the obligat	named entity submits the fines of registered agent.  Laurum  Signature, typed or printed name	Jalup	Assis	tant S	eco Secreta	ry	ed agent, or both, in	the State of Fi	1/7/0	) 5	and accept
Filing Fee Is \$61.25  Due by May 1, 2005  9. Election Campaign Filing Fund Contribution							\$5.00 May Be Added to Fees	Flo	rida Depai	k payable to tment of Si	tate
10.		CERS AND DIRECTOR	S	11.		- 1	ADDITIONS/CHANG	ES TO OFFICE	R\$ AND DI	RECTORS IN	
NAME STREET ADDRESS CITY-ST-ZIP	PD COMEAU, PETER 2907 BAY TO BAY E TAMPA, FL 33629	BLVD., #202	□ Delete							☐ Change	☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD CAMPBELL, JOHN 12730 NEW BRITTA FORT MYERS, FL 3		☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD FORKELL, DANIEL 2907 BAY TO BAY E TAMPA, FL 33629	BLVD. SUITE 301	☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP			☐ Delete							☐ Change	☐ Addition

12. I hereby certify that the information subplied with the filling 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 of this type 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 of this type 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 of this type 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 of the same 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 of the same 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 of the same 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 of the same 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 of the same 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 of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of the same legal effect as if made under oath; that I am an officer or director of the corporation of t

CITY-ST-ZIP

**SIGNATURE:** 

CITY-ST-ZIP

SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR

Peter R. Comeau 1-11-05

Daytime Phone #