

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

FILED
May 24, 2005 8:00 am
Secretary of State

04-20-2005 90292 005 ****61.25

DOCUMENT # N03000004638 1. Entity Name KESTRAL CIRCLE OWNERS ASSOCIATION, INC.					
Principal Place of Business 9080 KESTRAL CIRCLE ENGLEWOOD FL 34224			Mailing Address 9080 KESTRAL CIRCLE ENGLEWOOD FL 34224		
2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.		 1st MOORE CR2E037 (10/04)	
City & State		City & State			
Zip Country		Zip Country			
4. FEI Number 56-2358732				Applied For ☐ Not Applicable	
5. Certificate of Status Desired ☐				\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WOLLENBECKER, DONALD E 9080 KESTRAL CIRCLE ENGLEWOOD FL 34224				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 reappointing)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V BLACKFORD, JEAN 9117 KESTRAL CIR ENGLEWOOD FL 34224		TITLE ☒ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	RYSER JAN 9123 KESTRAL CIRCLE ENGLEWOOD FL 34224	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	B COURTER, JACK 9074 KESTRAL CIR ENGLEWOOD FL 34224		TITLE ☒ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	ELDRIDGE Jim 9032 KESTRAL CIRCLE ENGLEWOOD FL 34224	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S RYAN, TOM 9026 KESTRAL CIR ENGLEWOOD FL 34224		TITLE ☒ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	RYSER JAN 9123 KESTRAL CIRCLE ENGLEWOOD FL 34224	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T ☐ Delete WOLLENBECKER, DONALD E 9080 KESTRAL CIR ENGLEWOOD FL 34224		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	DONALD E WOLLENBECKER 9080 KESTRAL CIRCLE ENGLEWOOD FL 34224	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P ☐ Delete CHASTON, WILLIAM 9110 KESTRAL CIRCLE ENGLEWOOD FL 34224		TITLE ☐ Change ☐ Addition NAME STREET ADDRESS CITY-ST-ZIP	CHASTON WILLIAM 9110 KESTRAL CIRCLE ENGLEWOOD FL 34224	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	☐ Delete		TITLE ☐ Change ☐ 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: Donald E Wollenbecker DONALD E WOLLENBECKER 5-17-05 941-697-8984 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone					