


# 2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED**  
**Jan 27, 2005 08:00 A**  
**Secretary of State**

<b>DOCUMENT # N03000007634</b>	
1. Entity Name <b>GLENWOOD EAST PROPERTY OWNERS' ASSOCIATION, INC.</b>	

Principal Place of Business <b>4127 NW 27TH LN. SUITE A GAINESVILLE, FL 32606</b>	Mailing Address <b>PO BOX 357845 GAINESVILLE, FL 32635</b>
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01102005 No Chg-NP CR2E037 (10/03)

**DO NOT WRITE IN THIS SPACE**

4. FCI Number <b>57-1185960</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	

6. Name and Address of Current Registered Agent  <b>DAVIES, LISA 4127 NW 27TH LN., SUITE A GAINESVILLE, FL 32606</b>
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**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 \_\_\_\_\_ (NOTE: Registered Agent signature required when re-statuting) DATE \_\_\_\_\_

**Filing Fee is \$61.25  
Due by May 1, 2005**

9. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be  
Added to Fees**

10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY ST ZIP	PD <b>MCDONALD, JANET L 4127 NW 27TH LN., SUITE A GAINESVILLE, FL 32606</b>
TITLE NAME STREET ADDRESS CITY ST ZIP	VPD <b>LEE, DENNIS G 4127 NW 27TH LN., SUITE A GAINESVILLE, FL 32606</b>
TITLE NAME STREET ADDRESS CITY ST ZIP	STD <b>DAVIES, LISA 4127 NW 27TH LN., SUITE A GAINESVILLE, FL 32606</b>
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01/28/05-80008-005 61.25

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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(c), 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:**

 **Janet L. McDonald**

Date

**352-334-1976**  
Daytime Phone #