


**2007 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Mar 14, 2007 8:00 am
Secretary of State

03-14-2007 90028 004 ****61.25

DOCUMENT # N05000002911 1. Entity Name LUTZ NATURE PARK INC.	
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Principal Place of Business 766 LUTZ LAKE FERN RD. LUTZ, FL 33548 US	Mailing Address LUTZ NATURE PARK INC. PO BOX 1923 LUTZ, FL 33548 US
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DO NOT WRITE IN THIS SPACE



03122007 No Chg-NP CR2E037 (4/06)

4. FEI Number 27-0120213	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required

6. Name and Address of Current Registered Agent DONOVAN, TERRY 19019 US HWY 41 N. LUTZ, FL 33549

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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-stating) DATE _____
Signature, typed or printed name of registered agent and title if applicable.

**Filing Fee is \$61.25
Due by May 1, 2007**

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	P DONOVAN, TERRY 19019 US HWY 41 N LUTZ, FL 33549
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/T BUCKINGHAM, AURALEE 19216 BLOUNT RD. LUTZ, FL 33558
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D MUFFLY, JAY 102 5TH AVE. SE LUTZ, FL 33549
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HOEDT, PHYLLIS 202 W. LUTZ LAKE FERN RD. LUTZ, FL 33548
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D FELSENTAL, HARRY 1510 CANNONADE CT. LUTZ, FL 33549
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CECIL, ELEANOR 1701 CURRY RD. LUTZ, FL 33549

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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 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: Terry Donovan TERRY DONOVAN 3-12-07 813-949-6659
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #