2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

## Feb 07, 2008 8:00 am DOCUMENT # N05206 **Secretary of State** 1. Entity Name 02-07-2008 90031 018 \*\*\*\*61.25 VILLAGE PARK ASSOCIATION, INC. Mailing Address Principal Place of Business 428 VILLAGE CIRCLE S.W. WINTER HAVEN FL 33880 428 VILLAGE CIRCLE S.W. WINTER HAVEN FL 33880 3. Mailing Address 2. Principal Place of Business - No P.O. Box # Suite, Apt. #, etc. Suite, Apt. #, etc. 1st MOORE CR2E037 (10/07) City & State City & State 4. FEI Number Applied For 59-2751743 Not Applicable Country Zip Country Zip \$8.75 Additional 5. Certificate of Status Desired $\Box$ Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent HAGAN, PATRICIA N Street Address (P.O. Dox-Number to Not Acceptable) 485 VILLAGE CIRCLE S.W. WINTER HAVEN FL 33380 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. Lam familiar with, and accept the obligations of registered agent. resourer SIGNATURE Galuna Signature Hyperfor control name of registered agent and title if applicable. (NOTE: Begistered Agent signature radured when reinstating) FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to-\$5.00 May Be Due By May 1, 2008 Trust Fund Contribution. Added to Fees Florida Department of State 82445999 filmatial, mirsk 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 11. TITLE TITLE ☐ Delete Change Addition MADONNA RAINWATER LOWE, JUDY NAME NAME 489 VILLAGE CIRCLE SW 432 VILLAGE PIRCLE SW STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33880 CITY-ST-ZIP CITY-ST-ZIP WINTER HAVEN FL 33880 ☐ Delete TITLE KRZEWSKI JIHNSON, LIMOA NAME NAME WINTER HAVEN FL 405 VILLAGE CIRCLE SW STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33880 CITY-ST-7/F CITY-ST-7IP Delete ☐ Change THE TITLE Addition HAGAN, PATRICIA N 2008 NAME NAME 485 VILLAGE CIRCLE SW STREET ADDPESS STREET ADDRESS CITY-ST-ZIP WINTER HAVEN FL 33880 CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE BOGGS, ELAINE NAME 2008 NAME 466 VILLAGE CIRCLE SW STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33880 CITY-ST-ZIP CITY+ST-ZIP Change ☐ Dalete 11711 Addition THILE SANDRA DANDO WINTREE, BOSA NAME NAME 434 VILL ACE CIRCLE SW 499 VILLAGE CIR. SW STREET ADDRESS STREET ADDRESS SINTER HAVEN FL 33580 WINTER HAVEN FL 33880 CHY-57-709 City-St-ZIP TITLE Delete TITLE ☐ Change ■ Addition KINT, KEITH MANE 2008 468 VILLAGE CIR. SW STREET ADDRESS STREET ADDRESS WINTER HAVEN FL 33880 CITY-ST-ZIP

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 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 outh; 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:

01/31/08

FILED