

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 21, 2008 8:00 am
Secretary of State

02-21-2008 90015 037 ****61.25

DOCUMENT # N06000010023													
1. Entity Name YOST RETIREMENT PARK HOMEOWNERS ASSOCIATION, INC.													
Principal Place of Business 1112 WEST SHELL POINT ROAD LOT 300 304 RUSKIN, FL 33570			Mailing Address 1112 WEST SHELL POINT ROAD LOT 300 217 RUSKIN, FL 33570										
2. Principal Place of Business - No P.O. Box 1112 WEST SHELL POINT ROAD			3. Mailing Address 1112 WEST SHELL POINT ROAD										
Site, Apt. #, etc. LOT 304			Site, Apt. #, etc. LOT 217										
City & State RUSKIN FLORIDA			City & State RUSKIN FLORIDA										
Zip 33570		Country USA		4. FEI Number NOT APPLICABLE									
5. Name and Address of Current Registered Agent ABENDSCHEIN, HEDY L 1112 WEST SHELL POINT ROAD LOT 300 217 RUSKIN, FL 33570		7. Name and Address of New Registered Agent <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td colspan="2" style="padding: 2px;">Name ABENDSCHEIN, HEDY L</td> </tr> <tr> <td colspan="2" style="padding: 2px;">Street Address (P.O. Box Number & Not Acceptable) 1112 WEST SHELL POINT ROAD</td> </tr> <tr> <td colspan="2" style="padding: 2px;">LOT 217</td> </tr> <tr> <td style="padding: 2px;">City RUSKIN</td> <td style="padding: 2px;">FL Zip Code 33570</td> </tr> </table>				Name ABENDSCHEIN, HEDY L		Street Address (P.O. Box Number & Not Acceptable) 1112 WEST SHELL POINT ROAD		LOT 217		City RUSKIN	FL Zip Code 33570
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LOT 217													
City RUSKIN	FL Zip Code 33570												
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 not a lawyer, and except the obligations of registered agent. <table style="width:100%;"> <tr> <td style="width:40%; vertical-align: bottom;"> SIGNATURE <i>Hedy Abendschein</i> Signature, typed or printed name of registered agent and title if applicable. </td> <td style="width:20%; vertical-align: bottom; text-align: center;"> 2-19-08 Date </td> <td style="width:40%;"></td> </tr> </table>						SIGNATURE <i>Hedy Abendschein</i> Signature, typed or printed name of registered agent and title if applicable.	2-19-08 Date						
SIGNATURE <i>Hedy Abendschein</i> Signature, typed or printed name of registered agent and title if applicable.	2-19-08 Date												
Filing Fee is \$81.25 Due by May 1, 2008		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	P HIMMEL, LARRY 98 BLACK RIVER RD CROSWELL, MI 48422	☒ Change		P EBNER, GARY 3375 HALL ROAD CROSWELL, MI 48422	☒ Change ☐ Addition								
NAME				NAME									
STREET ADDRESS				STREET ADDRESS									
CITY-ST-ZIP				CITY-ST-ZIP									
TITLE				TITLE									
NAME				NAME									
STREET ADDRESS				STREET ADDRESS									
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CITY-ST-ZIP				CITY-ST-ZIP									
12. I hereby certify that the information supplied with this filing does not qualify for the exemptions outlined in Chapter 119, Florida Statutes. I further certify that the information included 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: <i>GARY EBNER</i> GARY EBNER 2-19-08													