

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 25, 2006 8:00 am
Secretary of State

01-25-2006 90030 039 ****61.25

DOCUMENT # N13985 1. Entity Name DUNNELLO SQUARE RESIDENT ASSOC. INC.					
Principal Place of Business 20451 POWELL RD DUNNELLO, FL 34431 US			Mailing Address 20451 POWELL RD. 86 DUNNELLO, FL 34431 US		
2. Principal Place of Business		3. Mailing Address 20451 Powell Rd			
Suite, Apt. #, etc.		Suite, Apt. #, etc. Lot 45			
City & State		City & State Dunnellon FL			
Zip	Country	Zip	Country	4. FEI Number 59-2734289	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required			
6. Name and Address of Current Registered Agent CAEMELLA, SHIRLEY 20451 POWELL ROAD LOT #86 DUNNELLO, FL 34431			7. Name and Address of New Registered Agent Name RITTER, Garry Street Address (P.O. Box Number is Not Acceptable) 20451 POWELL RD Lot 45 City Dunnellon FL Zip Code 34431		
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 Garry L. Ritter, Treasurer Garry L. Ritter 1/20/06 <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>					
Filing Fee is \$61.25 Due by May 1, 2006		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>		\$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	P CARMELLA, SHIRLEY 20451 POWELL ROAD LOT #86 DUNNELLO, FL 34431	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	P DON CAVERLY 20451 POWELL RD LOT 1 DUNNELLO FL 34431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	S STEWART, THEO 20451 POWELL ROAD LOT #89 DUNNELLO, FL 34431	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	V JOHN RYALS 20451 POWELL RD LOT 115 DUNNELLO FL 34431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	T PLUMMER, SUSAN 20451 POWELL RD., #14 DUNNELLO, FL 34431	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	EV PAN Smith 20451 POWELL RD LOT 80 DUNNELLO FL 34431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	V WENHOLD, PAUL 20451 POWELL RD., #55 DUNNELLO, FL 34431	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	S Edna Chancey Rd LOT 3 20451 POWELL RD DUNNELLO FL 34431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	2V RYALS, JOHN 20451 POWELL RD., #115 DUNNELLO, FL 34431	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Garry L. Ritter 20451 POWELL RD LOT 45 DUNNELLO, FL 34431
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D SCHWEGAL, RUSSELL 20451 POWELL RD., #11 DUNNELLO, FL 34431	<input type="checkbox"/> Delete		TITLE NAME STREET ADDRESS CITY-ST-ZIP	Change <input checked="" type="checkbox"/> Addition <input type="checkbox"/>
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 Garry L. Ritter Garry L. Ritter 1/20/06 352-489-7879 <small>SIGNATURE, AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #</small>					