

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 16, 2007 8:00 am
Secretary of State

01-16-2007 90261 002 ****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.
LOT 45
DUNNELLO, FL 34431 US**

50000249



2. Principal Place of Business - No P.O. Box #

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01122007

Chg-NP

CR2E037 (12/06)

City & State

City & State

4. FEI Number
59-2734289

Applied For
Not Applicable

Zip

Country

Zip

Country

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**RITTER, GARRY
20451 POWELL RD
LOT 45
DUNNELLO, FL 34431**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

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

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** ☐ Delete
NAME **CAVERLY, DON**
STREET ADDRESS **20451 POWELL RD, LOT 1**
CITY-ST-ZIP **DUNNELLO, FL 34431**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **V** ☒ Delete
NAME **RYALS, JOHN**
STREET ADDRESS **20451 POWELL RD LOT 115**
CITY-ST-ZIP **DUNNELLO, FL 34431**

TITLE ☐ Change ☒ Addition
NAME **Curt McALLESTER**
STREET ADDRESS **20451 POWELL Rd LOT 18**
CITY-ST-ZIP **Dunneillon FL 34431**

TITLE **2V** ☐ Delete
NAME **SMITH, PAM**
STREET ADDRESS **20451 POWELL RD LOT 80**
CITY-ST-ZIP **DUNNELLO, FL 34431**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **S** ☐ Delete
NAME **CHANCEY, EDNA**
STREET ADDRESS **20451 POWELL RD LOT 3**
CITY-ST-ZIP **DUNNELLO, FL 34431**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **T** ☐ Delete
NAME **RITTER, GARRY L**
STREET ADDRESS **20451 POWELL RD LOT 45**
CITY-ST-ZIP **DUNNELLO, FL 34431**

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE **D** ☒ Delete
NAME **SCHWEGAL, RUSSELL**
STREET ADDRESS **20451 POWELL RD., #11**
CITY-ST-ZIP **DUNNELLO, FL 34431**

TITLE ☐ Change ☒ Addition
NAME **Wilma Espallat**
STREET ADDRESS **20451 POWELL Rd Lot 37**
CITY-ST-ZIP **Dunneillon FL 34431**

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

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

Garry L Ritter GARRY L. Ritter 1/12/07 489-7879