2005 NOT-FOR-PROFIT CORPORATION

ANNUAL REPORT

DOCUMENT # N15242

PARK PLACE OF OCALA HOMEOWNERS ASSOCIATION,



FILED Mar 18, 2005 8:00 am Secretary of State

03-18-2005 90058 034 ****61.25

INC.											
2605 SW 33RD ST PO		Mailing Address PO BOX 2495 OCALA, FL 34474	O BOX 2495								
2. Principal Place of Business		3. Mailing Address									
Suite, Apt. #, etc.		Suite, Apt. #, etc.				02172005	Cha-	NP	CR2E0	37 (10/03)	
City & State		City & State				4. FEI Numbe 59-311	1255			A	pplied For
Zip	Country	Zip	ip Count			5. Certificate		s Desired		\$8.75 Add	
	6. Name and Address of Curren	t Registered Agent	_	1		7. Name and	Addres	s of New I	Registered	<u>`</u>	<u> </u>
				Name						Ť	
KIRKPATRICK, KENNETH 2605 SW 33RD ST BLDG #200			Street Addre		dress (P.	s (P.O. Box Number is Not Acceptable)					
OCALA, FL											
•				City					FL	Zip Cod	le
	named entity submits this statement (ions of registered agent.	or the purpose of changin	g its registe	ered office or i	registered	d agent, or bot	th, in the	State of Fi	lorida. I am	familiar with	and accept
SIGNATURE .	Signature, typed or printed name of registered ager	nt and title if applicable.	(NOTE: Register	red Agent signatur	re required w	hen reinstating)			DATE		
Filing Fee is \$61.25 Due by May 1, 2005 9. Election Campaign F Trust Fund Contribut											
						55.00 May B Added to Fees				k payable t rtment of S	
10.		Trust Fu		ution. [L.) A.C			Flo	rida Depa	rtment of S	tate
TITLE NAME	OFFICERS AND D VD MIMS, MIMA	Trust Fu	und Contribu	ution. [L) A P/D	Added to Fees		Flo	rida Depa	rtment of S	tate
TITLE	OFFICERS AND D	Trust Fu	11 TIT NAI STE	ution. [L) A P/D	Added to Fees		Flo	rida Depa	rtment of S	tate N 10
TITLE NAME STREET ADDRESS	OFFICERS AND D OFFICERS AND D VD MIMS, MIMA 1621 NE 2 ST #703 OCALA, FL 34470 SD BRITTON, LAURA N	Trust Fu	Ind Contribu	ution. [LE] IME REET ADDRESS IY-ST-ZIP ~	ALI ALI P/D Frank S/D Ripo	odded to Fees DDITIONS/CH. c, Mina sta, Pat	ANGES	TO OFFICE	rida Depa	rtment of S	tate N 10
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D OFFICERS AND D VD MIMS, MIMA 1621 NE 2 ST #703 OCALA, FL 34470 SD	Trust Fu	Ind Contribu	LUTION. L. LEE LME REET ADDRESS TY-ST-ZIP LLE LLE LLE LLE LLE LLE LLE L	P/D Frank S/D Ripo 1621	odded to Fees DDITIONS/CH. c, Mina sta, Pat NE 2nd	ANGES	TO OFFICE	rida Depa	RECTORS II	tate N 10 Addition
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TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	OFFICERS AND D OFFICERS AND D VD MIMS, MIMA 1621 NE 2 ST #703 OCALA, FL 34470 SD BRITTON, LAURA N 1621 NE 2ND ST. #302 OCALA, FL 34470 PD DEPASQUALE, DONNA	Trust Fu	Ind Contribu	LUTION. [I.] LE I. ME REET ADDRESS IY-ST-ZIP I. ME REET ADDRESS IY-ST-ZIP LE I. ME REET ADDRESS IY-ST-ZIP LE I. ME	S/D Ripo 1621 Ocal	sta, Pat NE 2nd a, FI, 34 nald, Mi	anges tti St. 1470	#402	rida Depa	RECTORS IN XX Change	tate ₹ 10 Addition XXddition
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12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

Mina Frank

2/22/05

352/369-9881