

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Apr 28, 2004 8:00 am
Secretary of State

04-28-2004 90269 034 ****61.25

DOCUMENT # N17856	
1. Entity Name DUCK LAKE POINT HOMEOWNERS ASSOCIATION, INC.	



Principal Place of Business 4513 DUCK LAKE PT. TALLAHASSEE FL 32303	Mailing Address 4513 DUCK LAKE PT. TALLAHASSEE FL 32303
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MOORE CR2E037 (11/03)

2. Principal Place of Business Suite, Apt. #, etc.		3. Mailing Address Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country

4. FEI Number 59-2952233	Applied For <input type="checkbox"/> Not Applicable
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5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
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6. Name and Address of Current Registered Agent ROBERTS, LINDA B 4513 DUCK LAKE PT. TALLAHASSEE FL 32303
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7. Name and Address of New Registered Agent	
Name Edward Geskie	
Street Address (P.O. Box Number is Not Acceptable) 4520 DUCK LAKE PT	
City Tallahassee	Zip Code FL 32303

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.	DATE 3-29-04

FILE NOW: FEE IS \$61.25 Due By May 1, 2004
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9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/>	\$5.00 May Be Added to Fees
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Make Check Payable to Florida Department of State
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10. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	ROBERTS, LINDA B 4513 DUCK LAKE PT. TALLAHASSEE FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D CHARLTON, AGNES 4512 DUCK LAKE PT. TALLAHASSEE FL
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD GESKIE, EDWARD 4520 DUCK LAKE PT TALLAHASSEE FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4512 DUCK LAKE PT
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10.	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Callie C Lawrence 3102 LAFAYETTE ST Ft Myers, FL 33916
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Catherine Charlton 313 Louise Ave Ft Myers FL 33916
TITLE NAME STREET ADDRESS CITY-ST-ZIP	4512 DUCK LAKE PT Tallahassee, FL 32303
TITLE NAME STREET ADDRESS CITY-ST-ZIP	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	

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.	
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SIGNATURE:	3/29/04	850-386-1860
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR	Date	Daytime Phone #