

**2008 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Apr 10, 2008 08:00 A
Secretary of State

DOCUMENT # N18351

1. Entity Name
**SANFORD CENTRAL PARK OWNERS ASSOCIATION,
INC.**



Principal Place of Business
**488 W HIGHBANKS ROAD
DEBARY, FL 33713**

Mailing Address
**488 W. HIGHBANKS RD.
DEBARY, FL 32713**



01182008 No Chg-NP

CR2E037 (4/06)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3151782

Applied For
Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

**BAUERLE, DONALD C JR
488 W. HIGHBANKS RD.
DEBARY, FL 32713**

**DO NOT WRITE
IN THIS SPACE**

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, 2008**

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

10. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	CB BAUERLE, DONALD C JR. 488 W. HIGHBANKS RD. DEBARY, FL 32713
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PRES BAUERLE, DONALD C III 488 W HIGHBANKS RD DEBARY, FL 32713
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04/22/09-80082-016 61.25

**DO NOT WRITE
IN THIS SPACE**

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:

Donald C. Bauerle III

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Donald C. Bauerle, III, PRES.

2.5.08

Date

386-668-4411

Daytime Phone #