

# **2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# N24324

**FILED**  
**Jan 25, 2012**  
**Secretary of State**

**Entity Name:** PARK PLACE OF OSCEOLA OWNER'S ASSOCIATION, INC.

**Current Principal Place of Business:**

101 PARK PLACE BLVD  
SUITE 3  
KISSIMMEE, FL 34741

**New Principal Place of Business:**

**Current Mailing Address:**

101 PARK PLACE BLVD  
SUITE 3  
KISSIMMEE, FL 34741

**New Mailing Address:**

**FEI Number:** 59-2768226

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

SCHOOLFIELD, C. WAYNE  
101 PARK PLACE BLVD. SU 3  
KISSIMMEE, FL 32741 US

**Name and Address of New Registered Agent:**

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.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PD  
Name: SCHOOLFIELD, WAYNE C  
Address: 101 PARK PLACE BLVD. #3  
City-St-Zip: KISSIMMEE, FL 34741

Title: STD  
Name: RASMUS, SHERAN  
Address: 101 PK PLACE BLVD., SUITE 3  
City-St-Zip: KISSIMMEE, FL

Title: VD  
Name: SCHOOLFIELD, CHERYL  
Address: 101 PK PLACE BLVD SUITE 3  
City-St-Zip: KISSIMMEE, FL 34741

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with all other like empowered.

SIGNATURE: SHERAN@SCHOOLFIELDPROPERTIES.COM

RA

01/25/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date