

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Mar 10, 2005 8:00 am
Secretary of State

03-10-2005 90144 041 ****61.25

DOCUMENT # N27027	
1. Entity Name CALA HILLS ONE HOMEOWNERS' ASSOCIATION, INC.	

Principal Place of Business 2605 SW 33RD STREET BUILDING 200 OCALA, FL 34474 US	Mailing Address P O BOX 2495 OCALA, FL 34478 US
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2. Principal Place of Business	3. Mailing Address
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State	City & State
Zip	Country

6. Name and Address of Current Registered Agent KIRKPATRICK, KEN 2650 SW 33RD STREET BLDG. #200 OCALA, FL 34474
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7. Name and Address of New Registered Agent
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
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Filing Fee is \$61.25 Due by May 1, 2005	9. Election Campaign Financing Trust Fund Contribution. ☐	\$5.00 May Be Added to Fees	Make check payable to Florida Department of State
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10. OFFICERS AND DIRECTORS		11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	P TATE, KEN 2401 SW 20TH TERR OCALA, FL 34474 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Jennings, Sid 2002 SW 24th Pl. Ocala, FL 34474 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D GREEN, CAROL 2435 SW 20TH CT. OCALA, FL 34474 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	P/D Jennings, Sid 2002 SW 24th Pl. Ocala, FL 34474 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D REDDISH, PATRICIA 2321 SW 20TH CT OCALA, FL 34474 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	V/D Jennings, Sid 2002 SW 24th Pl. Ocala, FL 34474 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D HUNTER, JOSIE 2303 SW COURT OCALA, FL 34474 ☒ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	S/D Lytle, Richard 2415 SW 20th Terr. Ocala, FL 34474 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD WILKINSON, TOM 2408 SW 20TH TERR. OCALA, FL 34474 ☐ Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	D Winrow, Kip 2403 SW 20th Terr. Ocala, FL 34474 ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	D KOTKE, BRUCE 2902 SHOAK CREEK VILLAGE LAKELAND, FL 33803 ☒ Delete	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.

SIGNATURE: *Sid Jennings* Sid Jennings, Pres 2/17/05 352/369-9881