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Mar 27 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N30524 (5)

1. Corporation Name

KEYSTONE TRAILER PARK HOMEOWNERS ASSOCIATION, IN
C.



Principal Place of Business

Mailing Address

620 CLEARWATER LARGO ROAD N.
LOT 103
LARGO FL 34640
US

C/O E. ROGERS
620 CLEARWATER LARGO RD., 103
LARGO FL 33770
US

3. Date Incorporated or Qualified
02/06/1989

3a. Date of Last Report
03/28/1996

2. Principal Place of Business

2a. Mailing Address

21 620 CLEARWATER LARGO RD N.

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 LOT 103

27

City & State

City & State

23 LARGO, FL

28

Zip

Country

Zip

Country

24 33770

25

U.S.A.

29

30

4. FEI Number

59-2981392

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ROGERS, EDWARD E.
620 CLEARWATER - LARGO ROAD NORTH
LOT 103
LARGO FL 34640-4997

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME TASKER, DAVID A.
STREET ADDRESS 620 CLEARWATER LARGO RD, LOT 30
CITY-ST-ZIP LARGO FL

☒ DELETE

1.1 TITLE PD
1.2 NAME GLENN OVERTON
1.3 STREET ADDRESS 620 CLEARWATER LARGO RD, LOT 323
1.4 CITY-ST-ZIP LARGO, FL 33770

☒ Change ☐ Addition

TITLE VD
NAME KING, JOHN J.
STREET ADDRESS 620 CLEARWATER LARGO ROAD, NORTH, LOT 124
CITY-ST-ZIP LARGO FL

☒ DELETE

2.1 TITLE VD
2.2 NAME BILL JONES
2.3 STREET ADDRESS 620 CLEARWATER LARGO RD, LOT 305
2.4 CITY-ST-ZIP LARGO, FL 33770

☒ Change ☐ Addition

TITLE STD
NAME KING, EILEEN
STREET ADDRESS 620 CLEARWATER LARGO ROAD, NORTH, LOT 317
CITY-ST-ZIP LARGO FL 33770

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

14. I do 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 annual report or supplemental annual 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 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Edward King* REQUIRED

3/21/97 (813) 559-8484

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR - DATE Daytime Phone # 0076964

CR2E037 (9/96)