2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT # N31241 1. Entity Name SPORTSMAN'S PARADISE EAST ACRES PROPERTY OWNERS' ASSOCIATION, INC.								04	FILE APR 30	•	•	
Principal Place of Business 7111 LADY HAWK LANE TALLAHASSEE, FL 32309 US			Mailing Address 7111 LADY HAWK LANE TALLAHASSEE, FL 32309 US					SECRETATY OF STATE TALLAHAS FOR DE ORIDA				
2. Principal Place of Business			3. Mailing Address									
Suite, Apt. #, etc.			Suite, Apt. #, etc.				_	04292004 Ch	g-NP C	R2E037 (10/03)		
City & State			City & State					4. FEI Number 04-1302695	5		oplied For ot Applicable	
Zip	Country		Zip	Zip Co		ıntry	try 5. Ce		tus Desired	S8.75 Add Fee Require		
	6. Name	and Address of Current	Registere	egistered Agent				7. Name and Address of New Registered Agent				
1						Name Manily Al Vell						
KELLEY, MARILYN N 7120 LADY HAWK ÉN TALLAHASSEE, FL 52309							Street Address (P.O. Box Number is Not Acceptable) 1128 Lady Hawk Lane					
_						City—/a	llahe	usec		FL Zip Coo	1e 309	
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 Decilies 7. Kelley Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE												
Fiting Fee is \$61.25 Due by May 1, 2004 9. Election Campa Trust Fund Cor						٠.		\$5.00 May Be Added to Fees		check payable t Department of S	1 .	
10. ,		OFFICERS AND DII	RECTORS		11.		A	DDITIONS/CHANGE	S TO OFFICERS /	AND DIRECTORS IN	V 10	
TITLE	ITLE PD						Presi	dent		⊠ Change	☐ Addition	
NAME	AE KELLEY, MARILYN				MAM	Ε	Kelle	y Marilyn N. Lady Hawk	lane-	, ,		
STREET ADDRESS 7120 LADY HAWK LN						ET ADDRESS	दायक					
CITY-ST-ZIP	TALLAHA	C			-ST-ZIP			32309				
TITLE T			⊠ Delete			Ę ,	Vice 1	resident		(X) Change	☐ Addition	
NAME				N			picke	President Ling; Donna Buck Skin A	ed		*	
	TREET ADDRESS 7039 BACKSKIN ROAD ITY-ST-ZIP TALLAHASSEE, FL 32309			l s			Tallehassee, FL 32309					
TITLE				Delete TIT			<u>Iaua</u> Treas		2.301	☐ Change	Addition	
NAME	BOYD, DA	ÁNA		PA Delete	NAM	- E :	Johns	ion, Stephanie Late Autum	- 1000	onlange	A radition	
STREET ADDRESS				STI			12734	Late Hurum	in thene			
CITY-ST-ZIP	TALLAHA	SSEE, FL 32309 .			CITY	-ST-ZIP	Tallal	hassee, FL tary iernan, Kim I Late Autum	32309		·	
TITLE				☐ Delete	TITLE	E	Secre mcki	iernan Kim		☐ Change	Addition	
NAME Street address					NAM	E ET ADDRESS	12724	1 Late Autum	n lane			
CITY-ST-ZIP	1			*		-ST-ZIP	Talla	hassee. FL	32309		.;	
TITLE				☐ Delete	TITLE			,		☐ Change	Addition	
NAME '	1				NAM						Į.	
STREET ADDRESS CITY-ST-ZIP			,			ET ADDRESS - ST- ZIP			03627	76369 1112 <u>**</u> 61.	ae	
TITLE				☐ Delete	TITLE			057137119	==01018==	<u>- [] </u>	25 ☐ Addition	
NAME		•		TT Delete	NAM					change		
STREET ADDRESS					STRE	ET ADDRESS					.	
CITY-ST-ZIP		· · · · · · · · · · · · · · · · · · ·		·		-ST-ZIP		<u> </u>				
12. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(f), 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: Tracily D. Killing 4-29-04 668-9317 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Date												
		SIGNATURE AND TYPED OR I	MINIEDNAM	E OF PIGNING OFFICER	M DIRECT	OH			ANG	Daytime Phone #		