

2004 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 02, 2004 8:00 am
Secretary of State

03-02-2004 90037 050 ****61.25

DOCUMENT # N31869

1. Entity Name

TEKA VILLAGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

2536 STAR LANE
ST. CLOUD FL 34772

Mailing Address

2536 STAR LANE
ST. CLOUD FL 34772

94023601



MOORE CR2E037 (11/03)

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

4. FEI Number

59-2955526

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SCUTOSKI, CAROL
2483 INDEPENDENCE LANE
ST. CLOUD FL 34772

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

FILE NOW: FEE IS \$61.25
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE D
NAME DUNN, JANET
STREET ADDRESS 2498 LONG PINE LN
CITY-ST-ZIP ST CLOUD FL 34772 ☒ Delete

TITLE VP
NAME OBERG, JOHN
STREET ADDRESS 4404 TEKA
CITY-ST-ZIP SAINT CLOUD FL 34772 ☐ Delete

TITLE S
NAME MINGOIA, NORMA
STREET ADDRESS 2546 STAR LANE
CITY-ST-ZIP SAINT CLOUD FL 34772 ☐ Delete

TITLE T
NAME CANTERBURY, ALICE M
STREET ADDRESS 2557 LONG PINE LN
CITY-ST-ZIP ST CLOUD FL 34772 ☐ Delete

TITLE D
NAME DIGGINS, THOMAS
STREET ADDRESS 2533 STAR LANE
CITY-ST-ZIP SAINT CLOUD FL 34772 ☒ Delete

TITLE P
NAME SCUTOSKI, CAROL
STREET ADDRESS 2483 INDEPENDENCE LN
CITY-ST-ZIP SAINT CLOUD FL 34772 ☐ Delete

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE D
NAME NORMA MCGRATH
STREET ADDRESS 2534 LONG PINE LN
CITY-ST-ZIP ST CLOUD, FL ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE D
NAME Peter Craig
STREET ADDRESS 2495 Longpine Ln
CITY-ST-ZIP St. Cloud, FL 34772 ☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP ☐ Change ☐ Addition

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:

Carol Scutoski

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-26-04

Date

407 892 6349

Daytime Phone #