2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

Secretary of State DOCUMENT # N32840 02-24-2005 90038 001 ****61.25 LAKE GIBSON VILLAGE HOMEOWNERS ASSOCIATION. Principal Place of Business Mailing Address P O BOX 92033 P 0 BOX 92033 LAKELAND, FL 33804-2033 LAKELAND, FL 33804-2033 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 02012005 Chg-NP CR2E037 (10/03) City & State City & State 4. FEI Number NOT APPLICABLE Applied For Not Applicable Zip Country Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent Name KASSMAN, REYNA M 251 GRANITE DRIVE Street Address (P.O. Box Number is Not Acceptable) -LAKELAND, FL 33809 City 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 Make check payable to 9. Election Campaign Financing Filing Fee is \$61.25 \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. TITLE Delete TITLE KIPPENBURGER, TIM NAME Tonya Worris 207 Warble Lane NAME STREET ADDRESS 296 GRANITE DR STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33809 CITY-ST-ZDP Lakeland FL 33809 ☐ Delete P/S TITLE MNE Change ■ Addition KASSMAN, REYNA NAME NAME Reyna Kassman 251 Granite Drive STREET ADDRESS 251 GRANITE DR STREET ADDRESS CITY-ST-ZIP LAKELAND, FL 33809 CITY-ST-ZIP akeland FL 33809 ☐ Delete Change ☐ Addition WESTLEY, VALJEANNE NAME NAME lalicanne Westley. 241 GRANITE DRIVE STREET ADDRESS STREET ADDRESS 241 Granite Drive LAKELAND, FL 33809 CITY-ST-7P CUTY-ST-ZEP <u>-eland FL 3380°</u> TITLE DITT F Delete ☐ Change **Addition** NAME Troy Durrance : , 259 Granite Drive NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP aleland FL 33809 TITLE Detete TITLE ☐ Change Addition NAME NAME Cheryl Cash STREET ADDRESS STREET ADDRESS 217 Granite Drive CITY-ST-ZIP CITY-ST-7/P -alcland FL 33609 TITLE ☐ Defete TITLE ☐ Chance Addition Tray Chaves NAME STREET ADDRESS STREET ADDRESS 219 Guranite Drive CITY-ST-ZIP FL 33609 eland 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. D NAME OF SIGNANG OFFICER OR DIRECTOR SIGNATURE:

FILED

Feb 24, 2005 8:00 am

ATTACHMENT

D Margaret Thomas 205 Marble Lane Lakeland FL 33809

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