

**2005 NOT-FOR-PROFIT CORPORATION
ANNUAL REPORT**

FILED
Jan 11, 2005 08:00 AM
Secretary of State

DOCUMENT # N33641

1. Entity Name
COLONY PARK COMMUNITY ASSOCIATION, INC.



Principal Place of Business
**1734 NW 17TH LANE
GAINESVILLE, FL 32605 US**

Mailing Address
**1734 NW 17TH LANE
GAINESVILLE, FL 32605 US**

DO NOT WRITE IN THIS SPACE



01072005 No Chg-NP CR2E037 (10/03)

4. FEI Number
59-2969044

Applied For
Not Applicable

5. Certificate of Status Desired ☒ **\$8.75 Additional
Fee Required**

6. Name and Address of Current Registered Agent

**TARBOX, GILLETTE C
1734 NW 17TH LANE
GAINESVILLE, FL 32605**

**DO NOT WRITE
IN THIS SPACE**

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 _____

**Filing Fee is \$61.25
Due by May 1, 2005**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

10. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**P
REYNOLDS, RICK
1615 NW 16TH DRIVE
GAINESVILLE, FL 32605**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**T
TARBOX, GILLETTE C
1734 NW 17TH LANE
GAINESVILLE, FL 32605**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
HALL, KAREN
1734 NW 17TH LANE
GAINESVILLE, FL 32605**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BLITCH, PEGGY
1818 NW 17TH LANE
GAINESVILLE, FL 32605**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
**D
BALLARD, KEN
1710 NW 16TH PLACE
GAINESVILLE, FL 32605**

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

000000177376
01/11/05-80037-004 70.00

**DO NOT WRITE
IN THIS SPACE**

12. I hereby certify that the information supplied with this filing 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:

Gillette C. Tarbox
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Gillette C. Tarbox

Jan 10, 2005
Date

352-337-0296
Daytime Phone #