

2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# N33641

FILED
Jan 07, 2008
Secretary of State

Entity Name: COLONY PARK COMMUNITY ASSOCIATION, INC.

Current Principal Place of Business:

PO BOX 357658
GAINESVILLE, FL 32635 US

New Principal Place of Business:

1755 NW 17TH LN
GAINESVILLE, FL 32605 US

Current Mailing Address:

PO BOX 357658
GAINESVILLE, FL 32635 US

New Mailing Address:

FEI Number: 59-2969044 **FEI Number Applied For ()** **FEI Number Not Applicable ()** **Certificate of Status Desired ()**

Name and Address of Current Registered Agent:

FIELD, DOROTHY W
1755 NW 17TH LN
GAINESVILLE, FL 32605 US

Name and Address of New Registered Agent:

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.

SIGNATURE: _____

Electronic Signature of Registered Agent

Date

OFFICERS AND DIRECTORS:

Title: P () Delete
Name: REYNOLDS, RICK
Address: 1615 NW 16TH DRIVE
City-St-Zip: GAINESVILLE, FL 32605

Title: T () Delete
Name: FIELD, DOROTHY W
Address: 1755 NW 17TH LN
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: FANN, SUSAN
Address: 1716TH NW 16TH PL
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: HALL, KAREN
Address: 1756 NW 17TH LANE
City-St-Zip: GAINESVILLE, FL 32605

Title: D () Delete
Name: BALLARD, KEN
Address: 1710 NW 16TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: LEMIRE, JENNIFER
Address: 1810 NW 17TH LN
City-St-Zip: GAINESVILLE, FL 32605

Title: () Change () Addition
Name:
Address:
City-St-Zip:

Title: D (X) Change () Addition
Name: BALLARD, LINDA
Address: 1710 NW 16TH PLACE
City-St-Zip: GAINESVILLE, FL 32605

I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DOROTHY FIELD

T

01/07/2008

Electronic Signature of Signing Officer or Director

Date