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

Jan 30, 2004 08:00 AM DOCUMENT # N36039 **Secretary of State** L.O.K. HOMEOWNERS ASSOCIATION AND COMMUNITY PATROL, INC. Principal Place of Business Mailing Address 7754 UNTREINER AVENUE 7754 UNTREINER AVENUE PENSACOLA FL 32534 US PENSACOLA FL 32534 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc Suite, Apt #, etc. MOORE CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-2999149 Not Applicable Zφ 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 WATSON, NORMAN Street Address (P.O. Box Number is Not Acceptable) 7754 UNTREINER AVENUE PENSACOLA FL 32534 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 FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Make Check Payable to Trust Fund Contribution. Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE Detete BILE Change Addition WATSON, NORMAN NAME NAME U000000023341 7754 UNTREINER AVENUE STREET ADDRESS STREET ADDRESS 02/02/04-80022-018 61.25 PENSACOLA FL 32534 DITY-ST-ZIP CSTY-ST-ZIP TATLE ☐ Delete DBF Change Addition PARKER, CHARLES NAME NAME 1072 CHAVERS STREET STREET ADDRESS STREET ADDRESS PENSACOLA FL 32534 CITY - ST- ZIP CITY-ST-ZIP TITLE TITLE ☐ Delete Change Change Addition CARTER, JESSE MARKE NAME 7618 UNTREINER AVE STREET ADDRESS STREET ADDRESS PENSACOLA FL 32534 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition WILLIAMS, LINDA M NAME NAME 1610 CHAPPIE PLACE STREET ADDRESS STREET ADDRESS PENSACOLA FL 32534 CITY - ST - 73P CFTY-ST-7IP TITLE ☐ Defete TITLE Change Addition CAMPBELL, JAMES NAME NAME 1207 PORTLAND STREET STREET ADDRESS STREET ADDRESS PENMSACOLA FL 32534 CITY ST-ZIP CITY-ST-ZIP TATLE TITLE ☐ Delete Change Change Addition MCCREARY, ULYSSES NAME 7950 MELBOUME AVE STREET ADDRESS STREET ADDRESS PENSACOLA FL 32534 CITY-ST-ZIP CITY-ST-7IP

12. I hereby certify that the information supplied with this filling 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: 4

Carter

1-27-04 (850) 476-676

FILED