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

Feb 25, 2004 8:00 am DOCUMENT # N42914 **Secretary of State** 1. Entity Name 02-25-2004 90048 008 ****61.25 THREE LAKES PARK CO-OP, INC. Principal Place of Business Mailing Address 12315 U.S. HIGHWAY 441 12 THREE LAKES PARK TAVARES FL 32778 12315 U.S. HIGHWAY 441 LOT #12 TAVARES FL 32778 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. CR2E037 (11/03) City & State City & State 4. FEI Number Applied For 59-3061897 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 CROAK, MICHAEL A P.A Street Address (P.O. Box Number is Not Acceptable) 2785 SOUTH BAY STREET SUITE G **EUSTIS FL 32726** 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 fitle it applicable (NOTE: Registered Agent signature required when reinstating) DATE FILE NOW: FEE IS \$61.25 9. Election Campaign Financing Make Check Payable to \$5.00 May Be Trust Fund Contribution, Due By May 1, 2004 Added to Fees Florida Department of State 10. OFFICERS AND DIRECTORS 11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 TITLE ☐ Delete TITLE Change ☐ Addition SCOTT, MARGARET NAME Scott, Margaret NAME 12315 U.S. HIGHWAY 441, #12 STREET ADDRESS 12315 US Highway 441, #12 STREET ADDRESS TAVARES FL 32778 CtTY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE Ω Change ∠ Addition HARLONG, JEFF He Rlong, Jeff 12315 U.S. HIGHWAY 441, #23 NAME NAME 12315 U.S. HIGHWAY 441, #23 STREET ADDRESS STREET ADDRESS TAVARES FL 32778 CITY-ST-7IP CITY-ST-78 Tavares FL 32778 TITLE Delete TITLE Payton, Donald Change Addition DUBE, ROGER ----MARAE NAME 12315 US. Highway 441 12315 U.S. HIGHWAY 441, #13 STREET ADDRESS STREET ADDRESS **TAVARES FL 32778** CITY-ST-ZIP CITY-ST-ZIP Tavares FL DBE ☐ Delete TITLE D٩ □ etiange ☐ Addition TINNEY, WARREN NAME Tinnoy, Warren 12315 H.S. Highway 441, #1 NAME 12315 U.S. HIGHWAY 441, #1 STREET ADDRESS STREET ADDRESS TAVARES FL 32778 CITY-ST-ZIP CITY-ST-7IP Towares. FL 32778 ☐ Delete TITLE TITLE ☐ Change ☐ Addition KING, BOB NAME NAME 12315 U.S. HIGHWAY 441, #11 STREET ADDRESS STREET ADDRESS TAVARES FL 32778 CITY-ST-7IP CITY-ST-ZIP TITLE ☐ Delete TITLE Change ☐ Addition NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

SIGNATURE:

FILED