

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

FILED
Apr 26, 2004 8:00 am
Secretary of State

04-26-2004 90436 045 ****61.25

DOCUMENT # N47853

1. Entity Name

SARATOGA LAKE ASSOCIATION, INC.



Principal Place of Business

136 SE 5TH ST
CAPE CORAL FL 33990
US

Mailing Address

136 SE 5TH ST
CAPE CORAL FL 33990
US

2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country



MOORE

CR2E037 (11/03)

4. FEI Number

NO-T APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

~~PELUSO, AL~~
136 S.E. 5TH ST.
CAPE CORAL FL 33990

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
Due By May 1, 2004

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE PD ☐ Delete
NAME PELUSO, AL
STREET ADDRESS 136 SE 5TH ST
CITY-ST-ZIP CAPE CORAL FL

TITLE D ☐ Delete
NAME DRUMM, GORDAN
STREET ADDRESS 426 SE SANTA BARBARA PL
CITY-ST-ZIP CAPE CORAL FL

TITLE TD ☒ Delete
NAME DARLEEN DRUMM
STREET ADDRESS 426 S.E. SANTA BARBARA PL.
CITY-ST-ZIP CAPE CORAL FL

TITLE SD ☐ Delete
NAME DAWN PELUSO
STREET ADDRESS 136 S.E. 5TH ST
CITY-ST-ZIP CAPE CORAL FL

TITLE D ☐ Delete
NAME DARRELL RAMSDEN
STREET ADDRESS 241 S.E. 3RD ST
CITY-ST-ZIP CAPE CORAL FL

TITLE VD ☐ Delete
NAME ORDINO, ANTHONY
STREET ADDRESS 211 SE 2ND AVE
CITY-ST-ZIP CAPE CORAL FL

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE TD ☒ Change ☐ Addition
NAME PAULINE PELUSO
STREET ADDRESS 136 S.E. 5TH ST.
CITY-ST-ZIP CAPE CORAL FLA. 33990

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
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:

al Peluso

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-22-04

Date

239-779-9395

Daytime Phone #