

FILE NOW: FILING FEE IS \$61.25

FILED

Mar 27 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N92000000215 (5)**
1. Corporation Name

ROSEDALE VILLAS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**8725 53 TERRACE EAST
BRADENTON FL 34202
US**

**P.O. BOX 20607
BRADENTON FL 34203-0601
US**

3. Date Incorporated or Qualified

11/04/1992

4. FEI Number

65-0400687

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

25 Country

24

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

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

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**KILLORAN, KEVIN
8725 53 TERRACE EAST
BRADENTON FL 34202**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

KEVIN KILLORAN

3-20-98

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **DP** ☐ DELETE
NAME **KILLORAN, KEVIN**
STREET ADDRESS **8725 53 TERRACE EAST**
CITY-ST-ZIP **BRADENTON FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE **DV** ☐ DELETE
NAME **OAKLEY, JAMES**
STREET ADDRESS **8729 53 TERRACE EAST**
CITY-ST-ZIP **BRADENTON FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE **DV** ☒ DELETE
NAME **GREENE, JACK**
STREET ADDRESS **8737 53 TERRACE EAST**
CITY-ST-ZIP **BRADENTON FL**

3.1 TITLE ☐ Change ☒ Addition
3.2 NAME **DV**
3.3 STREET ADDRESS **BOSSOM, JACK**
3.4 CITY-ST-ZIP **8744 53 TERRACE EAST**
BRADENTON, FL 34202

TITLE **T** ☒ DELETE
NAME **TRACY, RICHARD**
STREET ADDRESS **8724 53 TERRACE EAST**
CITY-ST-ZIP **BRADENTON FL**

4.1 TITLE ☐ Change ☒ Addition
4.2 NAME **T**
4.3 STREET ADDRESS **OSBERGFELL, ALLEN**
4.4 CITY-ST-ZIP **8742 53 TERRACE EAST**
BRADENTON, FL 34202

TITLE **SD** ☐ DELETE
NAME **LEININGER, MARY LOU**
STREET ADDRESS **8748 53 TERRACE EAST**
CITY-ST-ZIP **BRADENTON FL 34202**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 annual report or supplemental annual 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 12 or Block 13, if changed, or on an attachment with an address.

SIGNATURE: **X**

KEVIN KILLORAN

3-20-98

CR2E037 (10/97)