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

## Feb 25, 2004 8:00 am **Secretary of State** DOCUMENT # N93000001440 1. Entity Name 02-25-2004 90015 024 \*\*\*\*61.25 LAKE DAMON SOUTH HOMEOWNERS ASSOCIATION, INC. Principal Place of Business Mailing Address 303 PEABODY CIR AVON PARK FL 33825 US 338 GROVE CIRCLE 54010574 **AVON PARK FL 33825** 2. Principal Place of Business Mailing Address 344 GROVE CIRCLE Suite, Apt. #, etc Suite, Apt. #, etc. MOORE CR2E037 (11/03) Applied For City & State City & State 4. FEI Number 65-0401623 Not Applicable AVON Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required <u>US A</u> 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent Name ELAINE-KEPPLER-RUSE, JANET W Street Address (P.O. Box Number is Not Acceptable) 338 GROVE CIRCLE **AVON PARK FL 33825** City Zip Code **33825** AYON PARK 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. ELAINE KEPPLER Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) Make Check Payable to FILE NOW: FEE IS \$61.25 9. Election Campaign Financing \$5.00 May Be Trust Fund Contribution. Added to Fees Florida Department of State Due By May 1, 2004 ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 OFFICERS AND DIRECTORS 11. 10. ☐ Change Addition TITLE ☐ Delete TITLE KEPPLER, RON NAME NAME 344 GROVE CIRCLE STREET ADDRESS STREET ADDRESS AVON PARK FL 33825 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Delete Addition TITLE TITLE HEMMINGER, JERRY NAME NAME 330 GROVE CIRCLE STREET ADDRESS STREET ADDRESS **AVON PARK FL 33825** CITY-ST-ZIP CITY-ST-ZIP SD Delete TITLE ☐ Change Addition TITLE WILEY, PAT NAME NAME 302 GROVE CIRCLE STREET ADDRESS STREET ADDRESS AVON PARK FL 33825 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Change ☐ Addition TITLE Delete SEIFART, GEORGIA NAME NAMÉ 340 GROVE CIRCLE STREET ADDRESS STREET ADDRESS AVON PARK FL 33825 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition TITLE ☐ Delete TITLE **NEIL, HARRY** NAME NAME 358 GROVE CIRCLE STREET ADDRESS STREET ADDRESS **AVON PARK FL 33825** CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change ☐ Addition TITLE MUNDT, DALE NAME NAME 331 PEABODY CIRCLE STREET ADDRESS STREET ADDRESS **AVON PARK FL 33825** CITY-ST-ZIP

**FILED** 

changed, or on an attachment with an address, with all other like empowered. RONALD J. KEPPLER 2/19/04 **SIGNATURE:** 

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