

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED

Apr 22, 2005 08:00 AM
Secretary of State

DOCUMENT # N93000004299

1. Entity Name

LAKE WALKER SHORES PROPERTY OWNER'S
ASSOCIATION, INC.



Principal Place of Business

5529 U.S. 98 N.
LAKELAND FL 33809

Mailing Address

5529 U.S. 98 N.
LAKELAND FL 33809

2. Principal Place of Business

3. Mailing Address

Suite, Apt #, etc.

Suite, Apt #, etc.

City & State

City & State

Zip

Country

Zip

Country



1st MOORE

CR2E037 (10/04)

4. FEI Number

59-3235626

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

WILHELM, KENNETH F
5529 U.S. 98 N.
LAKELAND FL 33809

Name

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

City

FL

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
Due By May 1, 2005

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	D	<input type="checkbox"/> Delete
NAME	SAUNDERS, JOE L	
STREET ADDRESS	5529 U.S. 98 N.	
CITY- ST- ZIP	LAKELAND FL 33809	
TITLE	D	<input type="checkbox"/> Delete
NAME	WILHELM, KENNETH, F	
STREET ADDRESS	5529 U.S. 98 N.	
CITY- ST- ZIP	LAKELAND FL 33809	
TITLE	D	<input type="checkbox"/> Delete
NAME	TURNER, RONALD, V	
STREET ADDRESS	5100 U.S. 98N #15	
CITY- ST- ZIP	LAKELAND FL 33809	
TITLE	P	<input type="checkbox"/> Delete
NAME	BUSH, TONY R	
STREET ADDRESS	3836 WALKER SHORES DR	
CITY- ST- ZIP	BARTOW FL 33830	
TITLE	V	<input type="checkbox"/> Delete
NAME	JACKSON, CINDY	
STREET ADDRESS	3742 WALKER SHORES DR	
CITY- ST- ZIP	BARTOW FL 33830	
TITLE	TS	<input type="checkbox"/> Delete
NAME	BUSH, CYNTHIA	
STREET ADDRESS	3836 WALKER SHORES DR	
CITY- ST- ZIP	BARTOW FL 33830-8479	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	
TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	
STREET ADDRESS	
CITY- ST- ZIP	

U00000324429
04/22/05-80095-003 61.25

12. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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:

Kenneth F. Wilhelm
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #