

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

FILED
Feb 11, 2005 8:00 am
Secretary of State

02-11-2005 90037 014 ****66.25

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1. Entity Name

LAKELAND PARK OWNERS' ASSOCIATION, INC.



Principal Place of Business

2907 SE 22ND AVE.
OCALA FL 34471

Mailing Address

2907 SE 22ND AVE.
SUITE 302
OCALA FL 34471

2. Principal Place of Business

2191 NW 55TH AVE RD

Suite, Apt. #, etc.

3. Mailing Address

2191 NW 55TH AVE R.

Suite, Apt. #, etc.



1st MOORE

CR2E037 (10/04)

City & State

OCALA, FL

City & State

OCALA, FL

4. FEI Number

65-0557455

Applied For

Not Applicable

Zip

34482

Country

MARION

Zip

34482

Country

MARION

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

DAVIS, WILLIAM R
2907 SE 22ND AVE.
OCALA FL 33471

7. Name and Address of New Registered Agent

Name
DAVIS, WILLIAM R
Street Address (P.O. Box Number is Not Acceptable)
2191 NW 55TH AVE RD

City
OCALA, FL

Zip Code
34482

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 William R. Davis

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

(NOTE: Registered Agent signature required when reinstating)

2/8/05

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 PD
NAME DAVIS, W.R. ☐ Delete
STREET ADDRESS 2907 SE 22ND AVE.
CITY-ST-ZIP Ocala FL 34471

TITLE VPD
NAME DAVIS, ROBERT A ☐ Delete
STREET ADDRESS 439 RIDGEWAY DR
CITY-ST-ZIP LEXINGTON KY 40502

TITLE SD
NAME DAVIS, JOAN ☐ Delete
STREET ADDRESS 2907 SE 22ND AVE.
CITY-ST-ZIP Ocala FL 34471

TITLE VT
NAME PARSONS, MELANIE J ☐ Delete
STREET ADDRESS 8532 SW 65TH CT. RD.
CITY-ST-ZIP Ocala FL

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY-ST-ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE PD ☐ Change ☐ Addition
NAME DAVIS, W.R.
STREET ADDRESS 2191 NW 55TH AVE RD
CITY-ST-ZIP Ocala FL 34482

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

TITLE SD ☐ Change ☐ Addition
NAME DAVIS JEAN
STREET ADDRESS 2191 NW 55TH AVE RD
CITY-ST-ZIP Ocala, FL 34482

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: William R. Davis WILLIAM R DAVIS 2/8/05 352-402-0311

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #