

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

FILED
Jun 01, 2004 8:00 am
Secretary of State

05-05-2004 90217 040 ****61.25

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MOORE CR2E037 (11/03)

DOCUMENT # N94000004753					
1. Entity Name RANCH PLACE SUBDIVISION PROPERTY OWNERS ASSOCIATION, INC.					
Principal Place of Business 3414 RANCH PLACE BLVD ZEPHYRHILLS FL 33541 US			Mailing Address 3414 RANCH PLACE BLVD ZEPHYRHILLS FL 33541 US		
2. Principal Place of Business			3. Mailing Address		
Suite, Apt. #, etc.			Suite, Apt. #, etc.		
City & State			City & State		
Zip	Country	Zip	Country	4. FEI Number 59-3301406	
				Applied For ☐ Not Applicable	
				5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent SNYDER, STANLEY 3414 RANCH PLACE BLVD ZEPHYRHILLS FL 33541				7. Name and Address of New Registered Agent 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 _____ DATE _____ Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)					
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			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE	PD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	SNYDER, STANLEY		NAME		
STREET ADDRESS	3414 RANCH PLACE BLVD		STREET ADDRESS		
CITY-ST-ZIP	ZEPHYRHILLS FL 33629		CITY-ST-ZIP		
TITLE	STD	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	HARBIN, CINDY J		NAME		
STREET ADDRESS	9211 RIVERCOVE DRIVE		STREET ADDRESS		
CITY-ST-ZIP	RIVERVIEW FL 33569		CITY-ST-ZIP		
TITLE	ST	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	FRYMAN, MARY R.		NAME		
STREET ADDRESS	3248 RANCH PLACE BLVD		STREET ADDRESS		
CITY-ST-ZIP	ZEPHYRHILLS FL		CITY-ST-ZIP		
TITLE	D	☐ Delete	TITLE	☐ Change ☐ Addition	
NAME	FRYMAN, HERBERT O.		NAME		
STREET ADDRESS	3219 RANCH PLACE BLVD		STREET ADDRESS		
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			CITY-ST-ZIP		
TITLE		☐ Delete	TITLE	☐ Change ☐ Addition	
NAME			NAME		
STREET ADDRESS			STREET ADDRESS		
CITY-ST-ZIP			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:				817-288-4079	
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR		Date		Daytime Phone #	