

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Mar 27, 2006 8:00 am
Secretary of State

03-27-2006 90274 029 ****61.25

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1. Entity Name

PEDALERS POND HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

4794 Breezen Dr
4840 MALIBU DR
LAKE WALES FL 33859
US

Mailing Address

4794 Breezen Dr
4840 MALIBU DR
LAKE WALES FL 33859
US



2. Principal Place of Business

4794 Breezen Dr

Suite, Apt. #, etc.

Lake Wales

City & State

FL

Zip

33859

Country

USA

3. Mailing Address

4794 Breezen Dr

Suite, Apt. #, etc.

Lake Wales

City & State

FL

Zip

33859

Country

USA

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-3300037

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

GALLOWAY, ALBERT C JR
202 E. STUART AVE
LAKE WALES FL 33853

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

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, 2006

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 ~~BOD~~ Member
NAME BESWORTH, ROBERT
STREET ADDRESS 1946 PETAVERS POND BLVD
CITY-ST-ZIP LAKE WALES FL 33859

TITLE ~~SO~~
NAME POLLARD, RALPH
STREET ADDRESS 4840 MALIBU DR.
CITY-ST-ZIP LAKE WALES FL 33859

TITLE ~~VP~~
NAME LORD, STEVE
STREET ADDRESS 4707 BREEZER DR
CITY-ST-ZIP LAKE WALES FL 33859

TITLE ~~T~~
NAME EDWARDS, CATHY
STREET ADDRESS 41863 MALIBU DR
CITY-ST-ZIP LAKE WALES FL 33859

TITLE ~~D~~
NAME PLENEGER, DONNA
STREET ADDRESS 4700 LEGEND CT
CITY-ST-ZIP LAKE WALES FL 33859

TITLE ~~D~~
NAME PHENAGER, MIKE
STREET ADDRESS 4700 LEGEND CT
CITY-ST-ZIP LAKE WALES FL 33859

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE Pres Eleanor Loudon
NAME 4930 Malibu Dr
STREET ADDRESS Lake Wales Fl
CITY-ST-ZIP 33859 ☐ Change ☐ Addition

TITLE ~~SO~~ Sheila LaPanne
NAME 4794 Breezen Dr
STREET ADDRESS Lake Wales Fl
CITY-ST-ZIP 33859 ☐ Change ☐ Addition

TITLE ~~VP~~ Cathy Diaz
NAME 4843 Raleigh Pkwy
STREET ADDRESS Lake Wales Fl
CITY-ST-ZIP 33859 ☐ Change ☐ Addition

TITLE ~~BOD~~ Ralph Pollard
NAME 4840 Malibu Dr
STREET ADDRESS L.W Fl 33859 ☐ Change ☐ Addition

TITLE ~~BOD~~ Wendy Henderson
NAME 4766 Breezen Dr
STREET ADDRESS Lake Wales Fl 33859 ☐ Change ☐ Addition

TITLE ~~BOD~~ Gena Boquer
NAME 4927 Malibu Dr
STREET ADDRESS Lake Wales Fl 33859 ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, 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: Sheila LaPanne 3/9/06 863-439-4351