

2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Jan 27, 2005 8:00 am
Secretary of State

01-27-2005 90044 036 ****61.25

40007314



01032005 Chg-NP CR2E037 (10/03)

DOCUMENT # N98000000703 1. Entity Name PAREMORE COMMUNITY HOMEOWNERS' ASSOCIATION INC.			
Principal Place of Business 6504 NORTH MERIDIAN ROAD TALLAHASSEE, FL 32312		Mailing Address 6736 NORTH MERIDIAN RD TALLAHASSEE, FL 32312	
2. Principal Place of Business <i>6504 NO. Meridian Rd</i> Suite, Apt. #, etc.		3. Mailing Address <i>6736 North Meridian Rd</i> Suite, Apt. #, etc.	
City & State <i>Tallahassee, Fla</i>		City & State <i>Tallahassee, Fla.</i>	
Zip <i>32312</i>		Zip <i>32312</i>	
Country		Country	
4. FEI Number NOT APPLICABLE		Applied For <input type="checkbox"/> Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
6. Name and Address of Current Registered Agent WILSON, KERLEEN DICKEY F 6736 NORTH MERIDIAN RD TALLAHASSEE, FL 32312		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 _____ <small>Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE</small>			
Filing Fee is \$61.25 Due by May 1, 2005		9. Election Campaign Financing Trust Fund Contribution. <input type="checkbox"/> \$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 NAME STREET ADDRESS CITY - ST - ZIP	DVP HENDERSON, ROOSEVELT 200 CHINA DOLL DR. TALLAHASSEE, FL 32303	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	P FOUTZ, WILLIAM REV 6504 N. MERIDIAN RD. TALLAHASSEE, FL 32302	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DT DICKEY, WILLIE 9015 NO. MERIDAIN RD TALLAHASSEE, FL 32312	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D WILSON, LUCIAN JR 6736 NO. MERIDIAN RD TALLAHASSEE, FL 32312	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	DS WILSON, KERLEEN F D 6736 NO. MERIDIAN RD TALLAHASSEE, FL 32312	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	(Empty)	<input type="checkbox"/> Delete	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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: <i>Kerleen J. D. Wilson</i>		Date <i>1-23-2005</i>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Daytime Phone #</small>	

ATTACHMENT

40007314

#N98000000703

I am sending - Money order
for Annual Report

61.25. - money order

From: Keleen J. Wilson
6736 North meridian Rd
Tallahassee, Fla.

32312

Any Question Please Call.

850-893-2374

For - Ref.

Paramore Community Homeowners.
Association

North - meridian Rd

ATTACHMENT

12/30/04

CORPORATE DETAIL RECORD SCREEN

9:51 AM

NUM: N98000000703 ST: FL ACTIVE/FL NON-PROF FLD: 02/06/1998

LAST: REINSTATEMENT FLD: 05/05/2003

FEI#: NOT APPLICABLE

NAME : PAREMORE COMMUNITY HOMEOWNERS' ASSOCIATION INC.

NH: 1

PRINCIPAL: 6504 NORTH MERIDIAN ROAD

ADDRESS TALLAHASSEE, FL 32312

MAILING : 6736 NORTH MERIDIAN RD

CHANGED: 05/05/03

ADDRESS TALLAHASSEE, FL 32312

RA NAME : WILSON, KERLEEN DICKEY F

NAME CHG: 05/05/03

RA ADDR : 6736 NORTH MERIDIAN RD

ADDR CHG: 05/05/03

TALLAHASSEE, FL 32312 US

ANN REP : (2002) I 05/05/03 (2003) I 05/05/03 (2004) I 05/10/04

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1. MENU, 3. OFFICERS, 4. EVENTS, 6. NAMES, 7. LIST, 8. NEXT, 9. PREV

ENTER SELECTION AND CR: