


**2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Apr 11, 2005 8:00 am**  
**Secretary of State**

04-11-2005 90143 036 \*\*\*\*61.25

DOCUMENT # N98000000788			
1. Entity Name OVERLAND PARK HOMEOWNERS ASSOCIATION, INC.			
Principal Place of Business 920 THIRD ST STE B NEPTUNE BEACH, FL 32266 US		Mailing Address 920 THIRD ST STE B NEPTUNE BEACH, FL 32266 US	
2. Principal Place of Business		3. Mailing Address	
Suite, Apt. #, etc.		Suite, Apt. #, etc.	
City & State		City & State	
Zip	Country	Zip	Country
6. Name and Address of Current Registered Agent		7. Name and Address of New Registered Agent	
WALLACE, DENISE L 920 THIRD ST STE B NEPTUNE BEACH, FL 32266		Name <u>Wallace, L. Denise</u> Street Address (P.O. Box Number is Not Acceptable)  City <b>FL</b> 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 <u><i>Denise L. Taylor</i></u> <small>Signature, typed or printed name of registered agent and title if applicable.</small>		DATE <u>3/29/05</u> <small>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	PD KAY LASSITER, DERRI 7049 PROSPERITY PARK RD E JACKSONVILLE, FL 32244 <input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Derrri Lassiter-Taylor 7049 Prosperity Park Rd. E. Jacksonville, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD <input checked="" type="checkbox"/> Delete WHITE, TOMMY 7388 SPRING HILL RD JACKSONVILLE, FL 32244	TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Beverly Jones 7402 Overland Park Blvd. Jacksonville, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVPD <input type="checkbox"/> Delete HILL, FREDDIE A JR. 7410 HIGH BLUFF RD N JACKSONVILLE, FL 32244	TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition Lamar Sales 7427 Edénfield Park Rd. Jacksonville, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	TD <input checked="" type="checkbox"/> Delete MURRAY, JASON G 7408 OVERLAND PARK BLVD JACKSONVILLE, FL 32244	TITLE NAME STREET ADDRESS CITY-ST-ZIP	VP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Freddie Hill 7410 High Bluff Rd. N. Jacksonville, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD <input type="checkbox"/> Delete ATKINSON, ROBERT 7355 HIGH BLUFF RD N JACKSONVILLE, FL 32244	TITLE NAME STREET ADDRESS CITY-ST-ZIP	AVD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition Robert Atkinson 7355 High Bluff Rd. N. Jacksonville, FL 32244
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> Delete	TITLE NAME STREET ADDRESS CITY-ST-ZIP	<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: <u><i>Denise L. Taylor</i></u>		Date <u>3-30-05</u>	
<small>SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR</small>		<small>Date</small>	