

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

**FILED**  
**Feb 10, 2004 8:00 am**  
**Secretary of State**

02-10-2004 90005 023 \*\*\*\*61.25

**DOCUMENT # N98000003545**

1. Entity Name

LAKE KISSIMMEE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business  
15 LAKE KISSIMMEE MHP  
LAKE WALES FL 33853

Mailing Address  
15 LAKE KISSIMMEE MHP  
LAKE WALES FL 33853

**39004278**



MOORE CR2E037 (11/03)

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

59-3563564

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

LANE, DON  
15 LAKE KISSIMMEE MHP  
LAKE WALES FL 33853 98

Name

LOUIS S. BOJKOVSKY

Street Address (P.O. Box Number is Not Acceptable)

#52 LAKE KISSIMMEE MHP

City

LAKE WALES

FL

Zip Code

33898

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, 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 D  
NAME LANE, DON  
STREET ADDRESS 15 LAKE KISSIMMEE MHP  
CITY-ST-ZIP LAKE WALES FL 33853 ☒ Delete

TITLE D  
NAME MARGE O'BRIEN  
STREET ADDRESS 45 LK. KISS. MHP  
CITY-ST-ZIP LK. WALES, FL 33898 ☐ Change ☒ Addition

TITLE D  
NAME HATTON, RAY  
STREET ADDRESS 59 LAKE KISSIMMEE MHP  
CITY-ST-ZIP LAKE WALES FL 33853 ☒ Delete

TITLE PRG.  
NAME LOUIS S. BOJKOVSKY  
STREET ADDRESS #52 LK. KISS. MHP  
CITY-ST-ZIP LK. WALES, FL 33898 ☒ Change ☐ Addition

TITLE D  
NAME SALLEE, GEORGE  
STREET ADDRESS 51 LAKE KISSIMMEE MHP  
CITY-ST-ZIP LAKE WALES FL 33853 98 ☐ Delete

TITLE D  
NAME EMMERT STEIN  
STREET ADDRESS #50 LK KISS. MHP  
CITY-ST-ZIP LK WALES FL 33898 ☒ Change ☐ Addition

TITLE D  
NAME SHERROW, JENNIE  
STREET ADDRESS 32 LAKE KISSIMMEE MHP  
CITY-ST-ZIP LAKE WALES FL 33853 ☒ Delete

TITLE SEC.  
NAME JEAN SPITZER  
STREET ADDRESS #5 LK. KISS MHP  
CITY-ST-ZIP LAKE WALES, FL 33898 ☒ Change ☐ Addition

TITLE D  
NAME MCCABE, LARRY  
STREET ADDRESS 66 LAKE KISS MHP  
CITY-ST-ZIP LAKE WALES FL 33898 ☒ Delete

TITLE V.P.  
NAME LARRY DOTSON  
STREET ADDRESS #61 LK. KISS. M.H.P.  
CITY-ST-ZIP LK. WALES, FL 33898 ☒ Change ☐ Addition

TITLE D  
NAME O'BRIEN, WILLIAM A  
STREET ADDRESS 45 LAKE KISSIMMEE MHP  
CITY-ST-ZIP LAKE WALES FL 33853 98 ☐ Delete

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ Change ☐ 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:** LOUIS S. BOJKOVSKY *Louis S. Bojkovsky* 12/04/04 618-616-3069  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #