2008 NOT-FOR-PROFIT CORPORATION

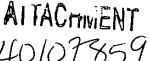
FILED Jun 04, 2008 8:00 am Secretary of State

06-04-2008 90010 025 ****61.25

ANNUAL REPORT

DOCUMENT # N98000003545 LAKE KISSIMME E HOMEOWNERS' ASSOCIATION, INC. Principal Place of Business Mailing Address 40107859 45 LK KISSIMMEE MHP 45 LK KISSIMMEE MHP LAKE WALES, FL 33898 LAKE WALES, FL 33898 2. Principal Place of Business - No P.O. Box # 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 05082008 Chg-NP CR2E037 (12/06) Applied For City & State City & State 59-3563564 Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired 7. Name and Address of New Registered Agent 6. Name and Address of Current Registered Agent O, BRIEN, WILLIAM Street Address (P.O. Box Number is Not Acceptable) LOT 45 LAKE KISSIMMEE MHP LAKE WALES, FL 33898 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 -(NOTE: Registered Agent signature required when reinstating) DATE Filing Fee is \$61.25 9. Election Campaign Financing \$5.00 May Be Make check payable to Trust Fund Contribution. Florida Department of State Added to Fees Due by September 12, 2008 OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11 TITLE ☐ Channe ☐ Addition TITLE ☐ Delete O'BRIEN, WILLIAM NAME NAME 45 LAKE KISSIMMEE MHP STREET ADDRESS STREET ADDRESS LAKE WALES, FL 33898 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition ☐ Delete TITLE TITLE TINCH, ELLIE NAME NAME 2 LAKE KISSIMMEE MHP STREET ADDRESS STREET ADDRESS LAKE WALES, FL 33898 CITY-ST-ZIP CITY-ST-ZIP ☐ Change ☐ Addition □ Delete TITLE TITLE MCCARVER, EVAN NAME NAME STREET ADDRESS 60 LAKE KISSIMMEE MHP STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33898 CITY-ST-ZIP Change Addition Delete TITLE SPITZER, JEAN NAME NAME **5 LAKE KISSIMMEE MHP** STREET ADDRESS STREET ADDRESS CITY-ST-ZIP LAKE WALES, FL 33898 CITY-ST-ZIP ☐ Change ☐ Addition TITLE ☐ Defete TITLE DOTSON, LARRY NAME NAME STREET ADDRESS STREET ADDRESS 61 LAKE KISSIMMEE MHP LAKE WALES, FL 33898 CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE ☐ Change ☐ Addition TITLE GLISSON, JACKIE NAME NAME STREET ADDRESS STREET ADDRESS 27 LAKE KISSIMMEE MHP CITY-ST-ZIP CITY-ST-ZIP LAKE WALES, FL 33898 12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 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 517, Florida Statutes; and that my name appears in Block 10 or Block 11 changed, or on an attachment with an address, with all other like empowered. Softained in Chapter 119, rolling states. I have been a same legal effect as if made under oath; that I am an officer or director apper 517, Florida Statutes: any that my name appears in Block 10 or Block 11 if cl SIGNATURE: SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Business to serve as RA



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Annual Report Online Filing N98000003545 **Document Number** Business Entity Name DAKE KISSIMMEE HOMEOWNERS' ASSOCIATION, INC. FEI Number 59 - 3563564 FEI Number Status

Listed Above
Applied For
Not Applicable Certificate of Status \$8.75 (Optional) Election Campaign Financing Trust Fund Contribution () Yes () No **Principal Place of Business Address** 45 LK KISSIMMEE MHP (PO Box not acceptable) Suite, Apt. #, etc. City, State LAKE WALES , FL Zip Code & Country 33898 **Mailing Address** If your mailing address is the same as the principal address above, please check the box below. Otherwis your mailing address. 🔀 Mailing address same as principal address 45 LK KISSIMMEE MHP Address Suite, Apt. #, etc. LAKE WALES City, State FL Zip Code & Country 33898 Name And Address of Registered Agent Name (Last, First, Middle, Title) O,BRIEN WILLIAM - OR -

Zip Code & Country

www.sunbiz.org - Department of	of State ATTACHMEN	Page
	4010 7859	
•	# N9800003545	
Street Address In Florida	LOT 45 LAKE KISSIMMEE MHP (PO Box n	ot acceptable)
Suite, Apt. #, etc.		
City, State	LAKE WALES , FL	
Zip Code & Country	33898 US	
Signature' block below to accept the	ent, the new agent will need to type their name in the 'Registered adesignation of registered agent. RA signature must be an individual must sign on their behalf. A business entity cannot s	lat
Registered Agent Signature	William G. Officen	
	e individual "signing" this document electronically or be maden of the individual, otherwise it constitutes forgery under	de with
Officer/Director Name A	And Address	
Name And Address #1		
Title	Р	
Name (Last, First, Middle, Title)	O'BRIEN , WILLIAM , A -,	
Entity Name to serve as Office	r/Director	
Street Address	45 LAKE KISSIMMEE MHP	
City, State	LAKE WALES , FL	
Zip Code & Country	33898	
Name And Address #2		
Title	Т	
Name (Last, First, Middle, Title) - OR -) TINCH , ELLIE , , ,	
Entity Name to serve as Office	r/Director	
Street Address	2 LAKE KISSIMMEE MHP	
City, State	LAKE WALES , FL	
Zip Code & Country	33898	

ATTAALIAATA

Name And Address #3

Title

D

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ATTACHMENT 140107859

Page 3 of 4

Name (Last, First, Middle, Title)

MCCARVER

EVAN

#N9.8000003545

- OR - Entity Name to serve as Officer/Director

Street Address

60 LAKE KISSIMMEE MHP

City, State

LAKE WALES

, FL

Zip Code & Country

33898

Name And Address #4

Title

S

Name (Last, First, Middle, Title)

SPITZER

JEAN

- OR -

Entity Name to serve as Officer/Director

Street Address

5 LAKE KISSIMMEE MHP

City, State

LAKE WALES

, FL

Zip Code & Country

33898

Name And Address #5

Title

D

Name (Last, First, Middle, Title)

DOTSON

LARRY

- OR -

Entity Name to serve as Officer/Director

Street Address

61 LAKE KISSIMMEE MHP

City, State

LAKE WALES

, FL

Zip Code & Country

33898

Name And Address #6

Title

D

Name (Last, First, Middle, Title)

GLISSON

JACKIE

- OR -

Entity Name to serve as Officer/Director

01/0000

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ATTACHMENT

Page 4 of 4

Street Address

City, State

27 LAKE KISSIMMEE MHP

LAKE WALES

#N9800003545

Zip Code & Country

33898

An individual named above or an individual signing on behalf of an entity named above must type their name in the 'Officer/Director Signature' block below. A corporate name is not allowed in this block.

Title

 ρ_{\cdot}

Officer/Director Signature

This signature must be that of the individual "signing" this document electronically or be made with the full knowledge and permission of the individual, otherwise it constitutes **forgery** under s.831.06, Florida Statutes. The individual "signing" this document affirms that the facts stated herein are true.

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