

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

FILED
Feb 18, 2004 8:00 am
Secretary of State

02-18-2004 90001 031 ****61.25

DOCUMENT # 729387

1. Entity Name

THE WEKIVA HUNT CLUB COMMUNITY
ASSOCIATION, INC.



Principal Place of Business

239 HUNT CLUB BLVD.
SUITE 101
LONGWOOD FL 32779
US

Mailing Address

239 HUNT CLUB BLVD
STE 101
LONGWOOD FL 32779
US

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

59-1531241

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required



MOORE

CR2E037 (11/03)

6. Name and Address of Current Registered Agent

TAYLOR, ROBERT LOCKE
850 CONCOURSE PARKWAY SOUTH
STE 105
MAITLAND FL 32751

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, 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

TITLE ☐ Delete
NAME NESS, CHARLES
STREET ADDRESS 201 CHURCHILL DRIVE
CITY-ST-ZIP LONGWOOD FL 32779

S ☐ Delete
NAME FLORA, JOHN
STREET ADDRESS 179 HAVILLAND PT
CITY-ST-ZIP LONGWOOD FL 32779

V ☐ Delete
NAME SACHER, THOMAS
STREET ADDRESS 109 COLYER DR
CITY-ST-ZIP LONGWOOD FL

D ☐ Delete
NAME OLSEN, TRACY
STREET ADDRESS 122 COTTESMORE CIR EAST
CITY-ST-ZIP LONGWOOD FL 32779

P ☐ Delete
NAME DAMIANI, LUI
STREET ADDRESS 225 PHEASANT RUN CT
CITY-ST-ZIP LONGWOOD FL 32779

D ☐ Delete
NAME FLORA, JOHN
STREET ADDRESS 179 HAVILLAND PT
CITY-ST-ZIP LONGWOOD FL 32779

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ Change ☐ Addition
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D ☒ Change ☐ Addition
NAME Sacher, Thomas
STREET ADDRESS 109 Colyer Dr.
CITY-ST-ZIP Longwood, FL. 32779

P ☒ Change ☐ Addition
TITLE
NAME OLSEN, TRACY
STREET ADDRESS 122 COTTESMORE CIR EAST
CITY-ST-ZIP LONGWOOD, FL. 32779

V ☒ Change ☐ Addition
TITLE
NAME DAMIANI, LUI
STREET ADDRESS 3600 LAKE UNDERHILL RD
CITY-ST-ZIP ORLANDO, FL 32803

D ☒ Change ☒ Addition
TITLE
NAME MATIAS, DAVE
STREET ADDRESS 200 Churchill Dr.
CITY-ST-ZIP Longwood, FL 32779

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:

Tracy Olsen TRACY OLSEN

2/12/04

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

Attachment
Doc. # 729387

54007720

ATTACHMENT TO 2004 ANNUAL REPORT

D MADDEN, ART
108 BEAUFORT DR.
LONGWOOD, FL 32779