2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 734620

FILED Mar 30, 2006 Secretary of State

Entity Name: WILDEWOOD SPRINGS CONDOMINIUM ASSOCIATION, INC.

Current Principal Place of Business:			New Principal Pla	New Principal Place of Business:	
	NGDALE DR. ON, FL 34210				
Current Mailing Address:			New Mailing Add	ress:	
	NGDALE DR. ON, FL 34210				
FEI Number:	: 59-1681934	FEI Number Applied For ()	FEI Number Not Applicable ()	Certificate of Status Desired ()	
Name and	Address of C	urrent Registered Agent:	Name and Addres	s of New Registered Agent:	
1820 RING SARASOT	ATHEN, CHAD BLING BLVD FA, FL 34236	US			
	named entity s e of Florida.	ubmits this statement for the p	urpose of changing its regist	ered office or registered agent, or both,	
SIGNATUR	RE:				
	Electroni	c Signature of Registered Age	nt	Date	
OFFICERS AND DIRECTORS:			ADDITIONS/CHAP	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:	
Title: Name: Address: City-St-Zip:	P () BECKWITH, JAN 617 WOODLAW BRADENTON, F	N DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Fitle: Name: Address: City-St-Zip:	S () BOOSINGER, G 409 PALM TREE BRADENTON, F	DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	T () POTTER, HARR 373 SPRINGDAI BRADENTON, F	LE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name: Address: City-St-Zip:	AT () BRINKS, DONAI 612 WWODLAV BRADENTON, F	VN DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Title: Name:	FRASER, ROBE 346 SPRINGDA	LE DRIVE	Title: Name: Address: City-St-Zip:	() Change () Addition	
Address: City-St-Zip:	BRADENTON, F				

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated 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 electronic 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 above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JAMES F. BECKWITH PRES 03/30/2006