

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 APR 12 PM 11:46

DOCUMENT # **743964** (9)

1. Corporation Name

WOODS OF ROLLING HILLS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% ANITA CALLAHAN
8251 SW 39TH CT.
DAVIE FL 33328

% ANITA CALLAHAN
8251 SW 39TH CT.
DAVIE FL 33328

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

08/17/1978

04/22/1994

4. FEI Number

Applied For

59-2314848

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CALLAHAN, ANITA
8251 SW 39TH CT.
DAVIE FL 33328

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.

SIGNATURE Anita Callahan

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reappointing)

DATE

Anita Callahan

4/1/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

PD
REGAN, RICHARD
8361 SW 39 COURT
DAVIE, FL 00000

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

President
Siegfried Schmidt
8391 SW 39 Court
Davie, FL 33328

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
CIVALE, JOHN
8411 SW 39TH COURT
DAVIE, FL 0

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

DVP
CIVALE, JOHN
same

☒ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

S
WILLIAMS, SUSAN
3920 SW 82 TERR
DAVIE FL

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
WILKES, CHRIS
8320 SW 39 CT
DAVIE, FL 00000

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

DVP
FISHMAN, BARBARA
8330 SW 39 COURT
DAVIE, FL 00000

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

Director
Robert Moore
8241 SW 39 Court
Davie, FL 33328

☒ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

T
POSHELUK, DIANNE
8211 SW 39 CT
DAVIE FL

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with my address.

SIGNATURE:

Siegfried Schmidt
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

President

3/22/95
Date

(Signature of Person)