

**2009 NOT-FOR-PROFIT CORPORATION AMENDED ANNUAL REPORT****FILED**  
**Jul 22, 2009**  
**Secretary of State**

DOCUMENT# 749312

**Entity Name:** WILDEWOOD SPRINGS II-B CONDOMINIUM ASSOCIATION, INC.**Current Principal Place of Business:**4920 FRUITVILLE RD  
SARASOTA, FL 34232**New Principal Place of Business:**1282 4TH ST.  
SARASOTA, FL 34236**Current Mailing Address:**4920 FRUITVILLE RD  
SARASOTA, FL 34232**New Mailing Address:**1282 4TH ST.  
SARASOTA, FL 34236**FEI Number:** 59-2002764**FEI Number Applied For ( )****FEI Number Not Applicable ( )****Certificate of Status Desired ( )****Name and Address of Current Registered Agent:**MA-CON, INC  
4920 FRUITVILLE RD  
SARASOTA, FL 34232 US**Name and Address of New Registered Agent:**ACTION ASSOCIATION MANAGEMENT, INC.  
1282 4TH ST.  
SARASOTA, FL 34236 US

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.

SIGNATURE: TOM DIETER

07/22/2009

Electronic Signature of Registered Agent

Date

**OFFICERS AND DIRECTORS:**

Title: D ( ) Delete  
Name: FOSSEN, KATHY  
Address: 206 PINENEEDLE DRIVE  
City-St-Zip: BRADENTON, FL 34210

Title: T ( ) Delete  
Name: BOLAND, CALVIN  
Address: 154 WILD PALM DRIVE  
City-St-Zip: BRADENTON, FL 34210

Title: VD ( ) Delete  
Name: BESSONETTE, LEAANN  
Address: 112 WILD PALM DR  
City-St-Zip: BRADENTON, FL 34210

Title: PD ( ) Delete  
Name: CLARKE, ROBERT  
Address: 217 PINENEEDLE DR  
City-St-Zip: BRADENTON, FL 34210

Title: SD ( ) Delete  
Name: BECK, DONALD  
Address: 153 WILD PALM DR  
City-St-Zip: BRADENTON, FL 34210

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify 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: TOM DIETER

CEO

07/22/2009

Electronic Signature of Signing Officer or Director

Date