FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 751309

WILD OAK BAY TERRACE II OWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address						
WAGNER PREP MOT HARMON AND GONGNER PROP MOT 4400 EL CONQUISTADOR PKWY P O BOX 10067 BRADENTON FL 34210 US US						
Principal Place of Business 2a. Mailing Address					3. Date Incorporated or Qualifed	
21 26					02/28/1980	
Suite, Apt. #, etc. Suite, Apt. #, etc.					4. FEI Number Applied For	
22 27					59-202 1991 Not Applicable \$8.75 Additional	
City & State City & State					5. Certificate of Status Desired Fee Required	
Zip	Country	Zip Country			6. Election Campaign Financing S5.00 May Be Trust Fund Contribution Added to Fees	
24	9. Name and Address of Current	<u> </u>	<u>) </u>		Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent	
,	3. Name and Address of Current	registered Agent	81	Name		
HAGERTY, JOHN A HARBONY SEAN AGESTIC			82	82 Street Address (P.O. Box Number is Not Acceptable)		
TO THE TAXABLE PARTY OF TAXA			62	SileerA	Address (F.O. Day Hamber is Not Acceptable)	
13 PRADENTON, FL 34282			83			
BRADENTON FL 34210			84	84 City 85 Zip Code		
				L	FL 15 2.5 5500	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: F	Registered Ager	t signature req	equired when reinstating) DATE	
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	☐ DELETE	1.1 TITLE		Change Addition	
NAME	MCDONALD, JOHN		1.2 NAME		COLE, CHARLES LYSI SEAGULL DRIVE, # 263 BRADENTON, FL 34210	
STREET ADDRESS	29 SHADY TREE		1.3 STREET ADDRESS		SEAGUL DRIVE,	
CITY-ST-ZIP	MOUNTAIN TOP PA		1.4 CITY-ST-ZIP		BRADBNTON, FL 34210	
TITLE	DS	☐ DELETE	2.1 TITLE		- Clange C Auditon	
NAME	STRIMLAN, CHARLES		2.2 NAME			
STREET ADDRESS			2.3 STREE		· · · · · ·	
CITY-ST-ZIP	BRADENTON FL	☐ DELETÉ	2. 4 CITY-5 3.1 TITLE	ST-ZIP	☐ Change ☐ Addition	
TITLE	D CDOSS EDANK		3.1 IIILE			
NAME STREET ADDRESS	GROSS, FRANK 3438 WOOD OWL CIR			FADDRESS		
	BRADENTON FL		3.4. CITY- S			
CITY-ST-ZIP TITLE	D D D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition	
NAME	BRIGHTMAN, ELEANOR		4. 2 NAME			
STREET ADDRESS				TADORESS		
CITY-ST-ZIP	BRADENTON FL 34210		4.4 CITY-S			
TITLE		☐ DELETE	5.1 TITLE		☐ Change ☐ Addition	
NAME	·		5.2 NAME		·	
STREET ADDRESS			5.3 STREE	T ADDRESS		

CITY-ST-ZIP 14. 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 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if charged, or on an attachment with an address, with all other like empowered.

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

OELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

NAME

Change

Addition

FILED

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Mar 01, 1999 8:00 am Secretary of State