2003 NOT-FOR-PROFIT CORPORATION UNIFORM BUSINESS REPORT (UBR)

DOCUMENT # 751309

Entity Name

WILD OAK BAY TERRACE II OWNERS ASSOCIATION, INC.



FILED Apr 15, 2003 8:00 am Secretary of State

04-15-2003 90118 008 ****61.25

			900 W	The state of the s					
Principal Place of Business HARMONY PREP MGT 4400 EL CONQUISTADOR PKWY BRADENTON FL 34210 US		Mailing Address 4400 EL CONQUISTOCK PKWY BRADENTON FL 34210 US		 		8481 8481 8481 8481	31 9 11 81811 17 3 1		
2. Principal Place of Business		3. Mailing Address						11 5 11 11511 1161	
Suite, Apt. #, etc.		Suite, Apt. #, etc.			CHECK HERE IF MAKING CHANGES				
City & State		City & State			4. FEI Number 59-2021991			Applied For Not Applicable	
Zip	Country Zip		Country	5. Certificate of Stat		atus Desired {	esired \$8.75 Additional Fee Required		
	6. Name and Address of Current	Registered Agent	ered Agent			7. Name and Address of New Registered Agent			
o. Harrie and Address of Garrier (1990)				Name					
HAGERTY, JOHN A 4400EL CONQUISTADOR PKWY			Street A	Street Address (P.O. Box Number is Not Acceptable)					
#13									
BRADENTON FL 34210			City				FL Zip C	ode	
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									
32.0									
	-U.E. NOW, EEE 10 664 65	npaign Financing		\$5.00 May Be	Make	Check Payab	le to		
FILE NOW: FEE IS \$61.25 Trust Fund Contribution					Added to Fees		Department o		
				Ω		·			
10.	OFFICERS AND DIF	RECTORS	11.		ADDITIONS/CHANG				
TITLE	D	☐ Delete	TITLE	Don	rLeonard	TIOKKA	. /3 Chang	e Addition	
NAME	TAYLOR, KENNETH		NAME	6	180 MI	10 000	7 1404		
STREET ADDRESS	6480 WILDOCK BAY		STREET ADDRESS CITY-ST-ZIP	13:	Leonard 480 Will radente	m Fl.	3/2/0		
CITY-ST-ZIP	BRADENTON FL 34210			1	-				
TITLE	D CTDIMI AN CHADIES	☐ Delete	TITLE	14.	~ 10/0:CC		☐ Chang	pe Addition	
NAME STREET ADDRESS	STRIMLAN, CHARLES 6471 SEAGULL DRIVE 258		NAME STREET ADDRESS	21	138 mag	alow a	خئ		
CITY-ST-ZIP	BRADENTON FL		CITY-ST-ZIP	37	138 des	for Fla			
TITLE	PD	☐ Delete	TITLE	<u> </u>	10.000	101-1-10	☐ Chanc	ne	
NAME	GROSS, FRANK		NAME						
STREET ADDRESS	3438 WOOD OWL CIR		STREET ADDRESS						
CITY-ST-ZIP	BRADENTON FL		CITY-ST-ZIP						
TITLE	TD	☐ Delete	TITLE				Chang	e 🔲 Addition	
NAME	MULKERN, MARIE		NAME						
STREET ADDRESS	3450 WOODLOWL CIR		STREET ADDRESS					İ	
CITY-ST-ZIP	BRADENTON FL 34210		CITY-ST-ZIP	<u></u>					
TITLE	D	☐ Delete	TITLE				Chang	je 🔲 Addition	
NAME	MATTHEWS, FRED		NAME						
STREET ADDRESS	6480 WILDOAK BAY BLVD #257		STREET ADDRESS					1	
CITY-ST-ZIP	BRADENTON FL 34210	<u> </u>	CITY-ST-ZIP						
TITLE		☐ Delete	TITLE				☐ Chang	ge	
NAME STREET ADDRESS			NAME STREET ADDRESS					}	
			CITY-ST-ZIP						
Siri Si Lii			1	l					

12. I hereby certify that the information supplied with this filling 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.

CICALATUDE.

SIGNATURE REQUIRED W Knows

4-1403

941-756-9009