FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

753262

(5)

Mailing Address

WOODCREST CONDOMINIUM ASSOCIATION, INC.

1920 WOODCREST DR #18 WINTER PARK FL 32792-5444		1920 WOODCREST OR #18 WINTER PARK FL 32792-5444		3. Date Incorporated or Qualified 07/07/1980	
				4. FEI Number	Applied For
2 Principal P	lace of Business	2a. Mailing Address		59-2066307	Not Applicable
21 26				5. Certificate of Status Desired	\$8.75 Additional Fee Regulred
		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
27		27		Trust Fund Contribution	Added to Fees
□ · · · · · · □ · · · · · · · · · · · ·		City & State		7. Is this nonprofit corporation a homeow	
23		28	~	L Yes	, □ No
Zip	Country	Zip	Country	8. This corporation owes or has paid the	
24	25	29	30	Personal Property Tax due June 30.	Yes No
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name					
CASH, SIDNEY G				dress (P.O. Box Number is Not Acceptable)	
	DODCREST DR		B3	······································	
WINTER PARK FL 32792					
			84 City	F	85 Zip Code
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 as	gent and title if applicable (NO	TE: Registered Agent signature requ	ired when reinstating) DATE	<u> </u>
12.	OFFICERS AT	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS A	AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	TRICE, MARY BETH		1.2 NAME		
STREET ADDRESS	1920 WOODCREST DRIVE #	16	1.3 STREET ADDRESS		
CITY-ST-ZIP	_WINTER PARK, FL 00000		1.4 CITY - ST - ZIP		
TITLE	VO	DELETE	2.1 TITLE		Change Addition
NAME	WHITTED, MARIE C		2.2 NAME		
STREET ADDRESS	1920 WOODCREST DR #4		2.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL		2. 4 CITY-ST-ZIP		
TITLE	SD	DELETE	3.1 TITLE		Change Addition
NAME	SAXE, PATRICIA T.		3.2 NAME		
STREET ADDRESS	1920 WOODCREST DR.,#18		3.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK, FL 00000		3.4. C(TY-S) - ZIP		
TITLE	TD	DELETE	4.1 TITLE		Change Addition
NAME	SAXE, PATRICIA T.		4, 2 NAME		

6.4 CITY-ST-ZIP

14. Thereby 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 changed, or on an attachment with an address.

4.3 STREET ADDRESS

5.3 STREET ADDRESS 5.4 CITY-ST-ZIP

6.3 STREET ADDRESS

4.4 CITY - ST- ZIP

5.1 TITLE 5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

SIGNATURE:

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

NAME

CITY-ST-ZIP

TITLE

Africia Y-S

1920 WOODCREST DR.,#18

WINTER PARK, FL 00000

Marco 5,1998

401-649-8312

Change

Change

Addition

Addition

FILED

Apr 13 1998 8:00am

Secretary of State

R2E037 (10/97)