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**Apr 26, 1999 8:00 am**  
**Secretary of State**

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NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 755030

1. Corporation Name

WEDGEWOOD TENNIS VILLAS OF TUSCAWILLA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

1401 FOREST HILLS DRIVE  
 WINTER SPRINGS FL 32708

Mailing Address

1401 FOREST HILLS DRIVE  
 WINTER SPRINGS FL 32708



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

11/06/1980

4. FEI Number  
 59-2377316

Applied For  
 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

9. Name and Address of Current Registered Agent

KOVEL, MARVIN  
 1425 SPALDING RD.  
 WINTER SPRINGS FL 32708

10. Name and Address of New Registered Agent

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 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: \_\_\_\_\_ DATE: \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	OTT, CATHERINE	
STREET ADDRESS	1475 CONNORS LN	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	CALLIHAN, PAUL	
STREET ADDRESS	1210 WINTER SPRINGS BLVD	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	DT	<input checked="" type="checkbox"/> DELETE
NAME	COE, CA	
STREET ADDRESS	787 EVERT COURT	
CITY-ST-ZIP	WINTER SPRINGS FL 32708	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FORD, MARGARET	
STREET ADDRESS	1446 SPALDING RD.	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SPAFFORD, HELEN	
STREET ADDRESS	730 ADIDAS RD	
CITY-ST-ZIP	WINTER SPRINGS FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	LORD, SR JAMES M	
STREET ADDRESS	880 BRUNSWICK LANE	
CITY-ST-ZIP	ROCKLEDGE FL 32955	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	SD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BARBARA PIROZZI	
1.3 STREET ADDRESS	764 DONLAP CIRCLE	
1.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
2.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	VD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	DAVID MITCHELL	
3.3 STREET ADDRESS	1468 CONNORS LANE	
3.4 CITY-ST-ZIP	WINTER SPRINGS, FL 32708	
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 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 changed, or on an attachment with an address, with all other like empowered

SIGNATURE: **SIGNATURE REQUIRED** *Marvin Kovel*

CR2E037 (1/98)