

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

**FILED
May 03, 2006
Secretary of State**

DOCUMENT# N00000006325

Entity Name: WEKIVA VILLAGE HOMEOWNERS' ASSOCIATION, INC.

Current Principal Place of Business:

2582 SOUTH MAGUIRE ROAD
SUITE 318
OCOEE, FL 34761

New Principal Place of Business:

Current Mailing Address:

2582 SOUTH MAGUIRE ROAD
SUITE 318
OCOEE, FL 34761

New Mailing Address:

FEI Number: 59-3707561 FEI Number Applied For () FEI Number Not Applicable () Certificate of Status Desired ()
In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Name and Address of Current Registered Agent:

SOLOMON, SPENCER R
113 DESIREE AURORA STREET
WINTER GARDEN, FL 34787 US

Name and Address of New Registered Agent:

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: _____

Electronic Signature of Registered Agent

_____ Date

OFFICERS AND DIRECTORS:

Title: PD () Delete
Name: NAPLEN, STAN
Address: 2170 WEKIVA VILLAGE LN.
City-St-Zip: LONGWOOD, FL 32703

Title: TD () Delete
Name: STITES, DAN
Address: 2182 WEKIVA VILLAGE LN.
City-St-Zip: APOPKA, FL 32703

Title: DS () Delete
Name: MARCY, SHARON
Address: 2275 WEKIVA VILLAGE LN
City-St-Zip: APOPKA, FL 32703

Title: () Delete
Name:
Address:
City-St-Zip:

Title: () Delete
Name:
Address:
City-St-Zip:

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: PD (X) Change () Addition
Name: BODINE, JAMES
Address: 2228 WEKIVA VILLAGE LN.
City-St-Zip: APOPKA, FL 32703

Title: TD (X) Change () Addition
Name: CHRISTIE, DORIS
Address: 2280 WEKIVA VILLAGE LN.
City-St-Zip: APOPKA, FL 32703

Title: VPD (X) Change () Addition
Name: WEIGHTMAN, JANICE
Address: 2248 WEKIVA VILLAGE LN
City-St-Zip: APOPKA, FL 32703

Title: D () Change (X) Addition
Name: MARCY, SHARON
Address: 2275 WEKIVA VILLAGE LANE
City-St-Zip: APOPKA, FL 32703

Title: SD () Change (X) Addition
Name: SANDERS, FRAN
Address: 2239 WEKIVA VILLAGE LANE
City-St-Zip: APOPKA, FL 32703

I hereby certify that the information supplied with this filing does not qualify for the 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: JAMES BODINE

PD

05/03/2006

Electronic Signature of Signing Officer or Director

_____ Date