

**2001 UNIFORM BUSINESS REPORT (UBR)**

FILED

01 SEP 28 AM 11:05

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N00000008168

1. Entity Name

BAYANIHAN AT WEDGEFIELD ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2262 BABBITT AVE  
ORLANDO FL 32833

2262 BABBITT AVE  
ORLANDO FL 32833

2. Principal Place of Business

2262 BABBITT AVE.

3. Mailing Address

SAME

Suite, Apt. #, etc.

ORLANDO, FL.

Suite, Apt. #, etc.

City & State

City & State

4. FEI Number

69-3683031

Applied For

Not Applicable

Zip

32833

Country

Zip

Country

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Name and Address of Current Registered Agent

MERCADO, CRIS  
2262 BABBITT AVE  
ORLANDO FL 32833

7. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
City FL Zip Code

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.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25  
After September 12, 2001, min. will be \$236.25

9. Election Campaign Financing  
Trust Fund Contribution.

\$5.00 May Be  
Added to Fees

Make Check Payable to  
Department of State

10. OFFICERS AND DIRECTORS

TITLE: PRESIDENT  Delete  
NAME: CRIS MERCADO  
STREET ADDRESS: 2262 BABBITT AVE.  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE: VICE PRESIDENT  Delete  
NAME: EMILYN TOBILLO  
STREET ADDRESS: 2101 ABALONE AVE  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE: SECRETARY  Delete  
NAME: DONNA SIAO  
STREET ADDRESS: 20111 MAXIM PKWY.  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE: TREASURER  Delete  
NAME: ZENAIDA CURA  
STREET ADDRESS: 3300 ABALONE AVE.  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE: PRO  Delete  
NAME: JOSE RAMOS  
STREET ADDRESS: 3322 OBERLY AVE  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE:  Delete  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: BOARD OF DIRECTOR  Change  Addition  
NAME: WILIE MENDOZA  
STREET ADDRESS: 3406 NORTHCLIFF AVE.  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE: BOARD OF DIRECTOR  Change  Addition  
NAME: TESS OBLEADA  
STREET ADDRESS: 2091 ABALONE AVE.  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE: BOARD OF DIRECTOR  Change  Addition  
NAME: JAMES SIAO  
STREET ADDRESS: 20111 MAXIM PKWY.  
CITY-ST-ZIP: ORLANDO, FL 32833

TITLE:  Change  Addition  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  Change  Addition  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

TITLE:  Change  Addition  
NAME:  
STREET ADDRESS:  
CITY-ST-ZIP:

12. 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 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.

SIGNATURE:

*[Signature]*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Day/ra Phone #

CFR2E037 (5/01)